APPLICATION FOR MARRIAGE LICENSE

HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR MAINTENANCE OF THE NORMAL MEMORIES AND APPLICATION FOR THE	MARRIAGE ER 3 1981 S County Date of Application
of I.C. 31-1-3-2 Effective July 1, 1977	FEMALE Medical Examination Report Dated 1-26-8/
MALE MALE M	Medical Examination Property Color
Medical Examination Report Dated	Name of Physician Shung Cohen
Name of Physician who	ever procures the issuance of a license to marry by any talse statement, representation or preten
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement	ever procures the issuance of a license to marry by any false statement, representation or pretens FEMALE APPLICANT
MALE APPLICANT	Name Fyest Mystage A Last
Name Figgs / Middle Last	Maria May
Mu William Yeaf	Date of Birth Month 5 1959
ale of Billing	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address Street of R. R. County State
Residence Address Street or R. R.	AT LONG OF THE STATE OF THE STA
Tade almost D. Charles	Previous Marital Status Never Married OR Last Marriage Ended By Death Discorce Annulment O
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth vertised by
D. Lines	□ ()ther(Specify)
Other (Specify) No Yes O	1 Are you now or have you ever been adjudged to be of unsound mind. No DYes!
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes	If answer is "yes" has the adjudication toon removed" No Vest
If answer is "yes", has the adjudication been removed? No Yes C 2. Are you afflicted with a transmissible disease?	2 Are you afflicted with a transmissible disease. No Ves
No W Yes U	3 Are you related to the male applicant closer than second cousin? NoD Yes NoD Yes NoD Yes
Are you now under the influence of intoxicating liquor?	4 Are you now under the influence of intoxicating liquor" No 7 Yes 5 Are you now under the influence of a narcotic drug" No 7 Yes
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now and the second of any dependent children.
6. List the full names of any dependent children.	Ryan alan Cox
Kyan alan Cox	- I year come of
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children No Yes
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued togetheir support
8. Full name of father Raymond Cox	8 Full name of father During Stenting
Residence of father (if deceased so state)	Residence of father of deceased so state). A smoothly for
Birthplace of father (State or foreign country)	Birthplace of father (State or furging country)
Ra paraulfur	Marking 1, 10M.
9. Full maiden name of mother	9 Full maiden name of mother / flephone full table
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana. County of HENDRICKS Sea: I depone and state the information give in this application is true and correct in this application is true and correct in this application.
Ein Cox	Danie Wear
New Address, R.R. #1 Box 166 Danville	Signed N. T. N. D. Z. J. B. of A. J. J. B. of A. J. J. J. B. of A. J. J. J. J. B. of A. J. J. J. J. B. of A. J.
New Address New Address day of All 1981	New Address 717 1 Dot 100 population
Mar () del	Subscribed and sworn to before me thing 3 day of This
Me Clasell Clerk HENDRICKS Circuit Court	Mary pre Kusself Our HENDRICKS Circuit Con
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one pare
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, County of HENDRICKS ss:	State of Indiana
County of HENDRICKS	State of Indiana, County of HENDRICKS
SignedFather	
Signed	Signed Fath
Subscribed and sworn to before me this day of , 19	Signed Moth
	Subscribed and sworn to before me this day of
COMPANIES	Cle
HENDRICKS LICENSE ISSUED BY ORDER OF COLLE	RT. A marriage license having been refused to the above named parties, the
in authorizes and directs the	ourt by written order issued and file
in authorizes and directs the issuance of RETURN OF MARRIAGE Average	of a marriage license to the
TRO THE DOWN THE LICENSE	E AND ACCOUNT
Be It Remembered, there was filed in my office a marriage licer day of Indiana dated the day of the	nse issued by the class of the
Be it further remembered, the following marriage certificate was filed in my of thousand the state of the sta	nse issued by the clerk of the HENDRICKS Circuit Country, 19 authorizing the joining together as husband and wi
Be it further remembered, the following marriage certificate	and
one thousand nine hundred and State of Indiana, Groom State Of and, Bride Of State Of Indiana, Groom State State Of Indiana, Gro	at Danielles Country of Hand
were by many it I	Of Mond County State of Ord
were by me united in marriage as authorized by a marriage license issued for Dated this day of	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19 3	.) ,
Filed and recorded in good	Signed Signed Part
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Expression Prost

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

File 42

Circuit Court

MALE	FEMALE
Medical Examination Report Dated 2-2-81	Medical Examination Report Dated 2-2-81
Name of Physician Block	Name of Physician Black
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (\$500,000".	The state of the s
	exer procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT Name First Middle	FEMALE APPLICANT
Carl Robert Dy	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 fereign country)
Residence Address Street or R. R. City County State	Jan d
2905 Consulato, Speedura, Indi	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Do Other (Specify) Drivers his we past	
	Other (Specify) Druges for Speat
1. Are you now or have you ever been adjudged to be of unsound mind? No No Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □	1. Are you now or have you ever been adjudged to be of unsound mind? No Wes
2. Are you afflicted with a transmissible disease? No \$\frac{1}{2}\$ Yes \$\square\$	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No No Yes	2. Are you afflicted with a transmissible disease? No ☑ Yes ☐ 3. Are you related to the male applicant closer than second cousin? No ☑ Yes ☐
4. Are you now under the influence of intoxicating liquor? No ♥ Yes □	3. Are you related to the male applicant closer than second cousin? No ☑ Yes ☐ 4. Are you now under the influence of intoxicating liquor? No ☑ Yes ☐
5. Are you now under the influence of a narcotic drug? No Yes O	5. Are you now under the influence of a narcotic drug? No ▼ Yes□
6. List the full names of any dependent children.	6. List the full names of any dependent children.
William Ministra	Greta Ranilla Sinnerna
	The state of the s
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father case R. Douton Sr.	8. Full name of father E. W. Donny
Residence of father (if deceased so state)	Residence of father (if deceased so state) West and and -
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Kansas
9. Full maiden name of mother Carbona & Jasyes	9. Full maiden name of mother Eller to Myyro
Residence of mother (if deceased so state)	
	Nesdences month (materials and materials and
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct.
100000	d h non B.
Signed Auf Lumin	Signed 200 Cook lo to Co
New Address 2905 CONSULATE LANE	New Address. A 100 Cornocate Cornoca
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, HENDRICKS ss:	State of Indiana, HENDRICKS } ss:
County of HENDRICKS	
Signed Father	Signed
Signed	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me this	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the
HENDRICKS County Cou	irt by written order issued
in Core authorizes and directs the issuance of	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
of Indiana dated the day of day of	, 19, authorizing the joining together as husband and wife
and the state of t	10
Be it further remembered, the following marriage certificate was filed in my of	ereby certify that on theday of,
1, bothy b bothy	County of Jana
Be it further remembered, the following marriage certificate was filed in my of I, hone thousand nine hundred and State of Indiana, Groom	(Marion County, State of Did
State of Indiana, Groom	Handrick County, State of Jud.
were by me united in marriage as authorized by a marriage license issued for the	hat purpose by the Clerk of the Circuit Court of HENDRICKS
were by me united in marriage as authorized by a marriage itemse total	하는데요? 그 한다. 나를 보이는데 얼마는 얼마는 나를 하는데
County. Dated this day of Job , 1951	Signed Sorry & Bellinolo
	Official Designation Winister
	10 day of John 19 81
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Clerk

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

2-4-1981 Date of Application

MAIN PROPRIES SHARE A	Effective July 1. 1911	FEMALE Medical Examination Report Dated 2-2-f/
Name of Population And Accordance of Address	MALE 7.b. 12.1881	Medical Examination Melvin S. Baird, Ja.
Name of Physician A. Section 1971. Mark of North Control of Name of Section 1972. Mark of North Control of Name of N	Medical Examination Report Dated	Name of Physician
ALL OUTSIDOS MINE DE CANTELLES OF THE CA	Name of Physician Kathuna Selray	over procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICATION OUT THE CONTROL OF	10 01 1 2 6 prescribed Tales	FEMALE APPLICANT
Some with the second programment of the seco	shall be lifted in any sain	DE First Midgly 1 Gast
The set that the print and the	MALE APPLICANT	Carnetta Day Year
The analysis of the company of the c	Name Vega	4
The process of the control of the co	Date of Birth Month Day 1953	Place of Birth (State or foreign country)
The complete of the complete o	Place of Birth (State of foreign country)	maranaflaw ptp Nity County Per
Person Marcal Board Description of Samuel Power Services and Control of Samuel Power	Seland Museus Space County State	9310 N. Litter, apt. 29 Jraps., Mar. N. 46
The throughout the control of the co	A APPOUND	A Status Never Married OR
Learner and the found of the control		Finded By Death Divorce Annument
Description of Series confidence or reviews serviced to the function man. Serviced Serviced to the serviced to	Previous Marital Status. Never India By Death Divorce Annulment D	Last Marriage Ended by Birth Certificate Judicial Decree
COMPLETE P MARRIAGE LICENSE INSUED BY ORDERS OF COURT. A marriage license having been and support to allow or substances and the substances and th	Date of high verified by: Birth Certificate Judicial Decree	
Description of the control of the control mail of the control of t	1 0	Other (Specify)
Legislate of the part of the p	Other(Specify) / C / Ves	1. Are you now or have you ever been adjudged to be of unsound mind* No. Yes D
As you will not not community the service of the comment of the co	. Are you now or have you ever been adjudged to be of unsound mind:	If answer is "yes", has the adjudication been removed* No Ves D
A responsable of the content of the content of an another and an another and an another and any of the content	If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease. No Yes C
A response under the inflament displaced incomes the second control of the second contro	2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin" No Yes
As you you when the form of anisotrate flower of the same of the state of the same o	Are you related to the female applicant closer than second cousin.	4. Are you now under the influence of intoxicating liquors No Yes
Les to the limited of the dispersion of this support the store of the	Are you now under the influence of intoxicating liquor:	5. Are you now under the influence of a narcotic drug" No Yes D
Second Content of Parlement Parlement of the other parlement of th	5. Are you now under the influence of a narcotic drug?	
Mention with the control of the cont		Jammy Brandon
The service of the control of the special con	Janiska Welster 5	A. 11. 10. 1
The service of the control of the special con	Mioriska Weleste Ce	arlalia Williams
And the production of the control of the other parent inverses and a provided as the Application be accompanied to statisticately provided as the control of the other parent inverses and a provided as the Application be accompanied to statisticately provided as the control of the other parent inverses and a provided as the Application be accompanied to statisticately provided as the control of the other parent inverses the provided as the control of the other parent inverses the provided as the control of the other parent inverses the parent of the state of Indiana. Signed Liver Parents of GUARDIAN New Address of State of Indiana. New Address of the parents of the other parent inverses and directs the inverses to the control of the other parent inverses and directs the inverses to the applicate for the application to true and correct. Signed Liver Parents of GUARDIAN New Address of the applicate benefit sources for this marriage. If only one parent inverses the parents are the control of the other parent inverses and directs the inverses to the applicate benefit sources for this marriage. If only one parent inverses the parents and the other parents inverses and directs the inverse of a marriage license having been refused to the above named parties. Signed State of Indiana. RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. RETURN OF MARRIAGE LICENSE ADMINISTRATE COURT of the county of the state of Indiana and Indiana that the control of the county of the Indiana and Indiana that the county of the County of Indiana dated the State of Indiana that the county of the County of the County of Indiana dated the State of Indiana that the county of Indiana count to before one this. Signed Marriage county of the County of Indiana that the county of Indiana that the county of the County of Indiana county of Indiana county of the County of Indiana county of Indiana county of Indiana that the county of Indiana county of Indiana county of Indiana		
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Base of Indiana. County of Signed Lives Hendricks of the marriage. If only one parent signs and foreign country of Signed Lives Hendricks and correct some signs of this application is true and correct some signs of the sign of the sig	9. Full maiden name of mother Ochobica Heller Wender	0-1-1
Board of Indiana. HENDRICKS Signed Lown New Address County of HENDRICKS County of HENDRICKS Signed Lown New Address County of HENDRICKS Signed Lown New Address County of HENDRICKS Signed Lown We, the parents of this applicant bareby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary Signed Mahor Signed Subscribed and sworm to before me this day of HENDRICKS County of HENDRICKS Signed Subscribed and sworm to before me this day of HENDRICKS Signed Subscribed and sworm to before me this day of HENDRICKS County of HENDRICKS Signed Subscribed and sworm to before me this day of HENDRICKS County of HENDRICKS Signed Subscribed and sworm to before me this day of HENDRICKS County of HENDRICKS Signed Subscribed and sworm to before me this day of HENDRICKS County of HENDRICKS County of HENDRICKS Signed Subscribed and sworm to before me this day of HENDRICKS County of HENDRICKS County of HENDRICKS County of HENDRICKS Signed Subscribed and sworm to before me this day of HENDRICKS County of HENDRICK	Residence of mother (if deceased so state) Indianopolis, In	Residence of mother (if deceased so state) maple, .
State of Indiana. HENDRICKS Signed County of Signed County Signed Signed County Signed Signed County Signed Signed County Signed Signed Signed Signed County Signed Sign	M	-d/n-Timb
State of Indiana. Now Address Signed Country of Signed		
Subscribed and sworn to before me thin. Correct Court Court Correct Court Correct Court Correct Court Consens of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indians. Subscribed and sworn to before me this County of Signed Signed Signed Subscribed and sworn to before me this Subscribed and sworn to before me this Subscribed and sworn to before me this County of HENDRICKS Signed Subscribed and sworn to before me this County of MENDRICKS County of HENDRICKS Signed Subscribed and sworn to before me this County of MENDRICKS County of HENDRICKS County of MENDRICKS County of MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the County of MARRIAGE MENDRICKS County of MARRIAGE MENDRICKS County of Marriage County of Marriage County of Marriage County, State of Mendred and Signed And Distribution of Marriage County, State of Mendred and Signed Marriage County, State of Mendred Designation Official Designation Official Designation Official Designation Official Designation Signed Signed Signed Signed Official Designation Official Designation Official Designation	HENDRICKS 88: in this application is true and correct.	County of HENDRICKS 88: in this application is true and correct.
Subscribed and sworn to before me thin. Correct Court Court Correct Court Correct Court Correct Court Consens of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indians. Subscribed and sworn to before me this County of Signed Signed Signed Subscribed and sworn to before me this Subscribed and sworn to before me this Subscribed and sworn to before me this County of HENDRICKS Signed Subscribed and sworn to before me this County of MENDRICKS County of HENDRICKS Signed Subscribed and sworn to before me this County of MENDRICKS County of HENDRICKS County of MENDRICKS County of MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the County of MARRIAGE MENDRICKS County of MARRIAGE MENDRICKS County of Marriage County of Marriage County of Marriage County, State of Mendred and Signed And Distribution of Marriage County, State of Mendred and Signed Marriage County, State of Mendred Designation Official Designation Official Designation Official Designation Official Designation Signed Signed Signed Signed Official Designation Official Designation Official Designation	N. O. I. Johnton	re do willow V To day
Subscribed and evern to before me this	Signed Lune y Warsell	
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indians. Country of HENDRICKS Signed. Signed. Subsectibed and sworn to before me this. Any of 19. Correct Country of HENDRICKS Signed. Subsectibed 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. COUNTRY of Written order issued. Multiple Signed. Subsectibed and sworn to before me this day of COUNTRY OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the And yof Be it jurther remembered. The following marriage certificate was filed in my office, to-unit. hereby certify that on the day of Country State of Indiana Groom Country State of Country State of Country State of Country State of Local Marriage forms to the consent of the shown and the John of the Country State of Local Marriage forms to the above named parties. Be it jurther remembered. The following marriage certificate was filed in my office, to-unit. hereby certify that on the day of Country State of Local Marriage forms to the Circuit Court of HENDRICKS Filled and recorded in accordance with the laws of the State of Indiana this Aday of Signed Signed PROBLEM TO PARENTS. PARENT OR GUARDIAN We, the parents. of this applicant hereby give consent for this marriage. If only one parent which render the scher parent unnecessary. Signed Country State of Indiana this Aday of Signed Signed Consent of Parents. of this applicant hereby give consent for this marriage. If only one parent which render the consent of the other parent unnecessary. State of Indiana. Country of Country Marriage Icense to the above named parties. Country State of Country of Country of Country of Country of Country of Country 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 Indians. Country of HENDRICKS Signed. Signed. Subsectibed and sworn to before me this. Any of 19. Correct Country of HENDRICKS Signed. Subsectibed 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. COUNTRY of Written order issued. Multiple Signed. Subsectibed and sworn to before me this day of COUNTRY OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the And yof Be it jurther remembered. The following marriage certificate was filed in my office, to-unit. hereby certify that on the day of Country State of Indiana Groom Country State of Country State of Country State of Country State of Local Marriage forms to the consent of the shown and the John of the Country State of Local Marriage forms to the above named parties. Be it jurther remembered. The following marriage certificate was filed in my office, to-unit. hereby certify that on the day of Country State of Local Marriage forms to the Circuit Court of HENDRICKS Filled and recorded in accordance with the laws of the State of Indiana this Aday of Signed Signed PROBLEM TO PARENTS. PARENT OR GUARDIAN We, the parents. of this applicant hereby give consent for this marriage. If only one parent which render the scher parent unnecessary. Signed Country State of Indiana this Aday of Signed Signed Consent of Parents. of this applicant hereby give consent for this marriage. If only one parent which render the consent of the other parent unnecessary. State of Indiana. Country of Country Marriage Icense to the above named parties. Country State of Country of Country of Country of Country of Country of Country of	Subscribed and gworn to before me this 3 day of Jet 198/	Subscribed and sworn to before me this 4th day of Jehr 1967
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of Signed Subscribed and sworn to before me this day of Cierk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. BETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Ago of Judiana dated the day of of Judiana dated the day of signed structured in my office a marriage license issued by the clerk of the FNDRICKS Be it further remembered, lie following marriage certificate was filed in my office, to-wit: hereby certify that on the day of County, State of Indiana, Groom and, Bride. Of Indiana, Groom and Judy of County, State of County, State of County, State of County, State of Indiana, Groom and Judy of County, State of County, State of County, State of County, State of Indiana, Groom Agy of County, State of County, State of County, State of Indiana, Groom Agy of County, State of County, State of County, State of County, State of Indiana, Groom Agy of County, State of Indiana, Groom Agy of County, State of Indiana day of County, State of County, State of County, State of Day County, State of Indiana this day of Signed Official Designation Signed Signed County Coun	Mr. A Mariana Mariana	mary and Lussell Gert HENDRICKS Circuit Court
We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed Subscribed and aworn to before me this. And of Clerk 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 And y of Subscribed and add the Subscribed and subscribed subscribed and subscri	Circuit Court	The property with
We, the parents, of this applicant hereby 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 day of	CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
State of Indiana. County of HENDRICKS Signed Signed 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. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the Subscribed and sworn to before me this day of Marriage license issued by the clerk of the HENDRICKS Circumstrate of Indiana dated the State of Indiana dated in my office, to-util. hereby certify that on the day of County, State of Indiana, Groom and partiage license issued for that purpose by the Clerk of the Circuit Court of HENDRICKS County. Filed and recorded in accordance with the laws of the State of Indiana this. Official Designation Official Designation Aday of Signed	We, the parents, of this applicant hereby give consent for this marriage. If only one perent	
State of Indiana. County of HENDRICKS Signed Signed Signed Signed Signed 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. 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 of Indiana dated the day of Indiana dated the day of Authorizes and of the county of the county. State of Indiana, Groom and, Bride. day of County of County of County, State of County, State of County, State of County. Signed Official Designation Signed Official Designation Signed Official Designation Signed Official Designation		we, the parents, of this applicant hereby give consent for this marriage. If only one parent
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Signed Signed Signed Signed Subscribed and sworn to before me this Support of the property of the purpose by the Clerk of the Circuit Court of HENDRICKS Signed Signed Subscribed and sworn to before me this Signed Subscribed and sworn to before me this Signed Subscribed and sworn to before me this Subscribed and sworn to before		
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Signed Mother 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. 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 of Indiana dated the day of Indiana dated the day of Methor remembered, the following marriage certificate was filed in my office a marriage license issued by the clerk of the HENDRICKS Circ day of And hereby certify that on the day of County, State of County, Sta		County of HENDRICKS
Signed Mother 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. 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 of Indiana dated the day of Indiana dated the day of Methor remembered, the following marriage certificate was filed in my office a marriage license issued by the clerk of the HENDRICKS Circ day of And hereby certify that on the day of County, State of County, Sta	Signed Father	Signed
Subscribed and sworn to before me this day of	Signed	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the day of and and and hereby certify that on the day of literate of Indiana, Groom and, Bride of Indiana, Groom at the state of Indiana, Groom and, Bride day of literate of Indiana, Groom and, Bride day of literate of Indiana day of literate of Indiana, Groom and literate of Indiana day of literate of Indiana, Groom and literate of Indiana day of literate of Indiana, Groom and literate of Indiana, Groom and literate of Indiana day of literate of Indiana, Groom and literate of Indiana day of litera		
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RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the day of	Clerk	Clei
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 Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the State of Indiana, Groom 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 Filed and recorded in accordance with the laws of the State of Indiana this Signed Official Designation Signed	COMPLETE IF MARRIAGE LICENSE ISSUED BY	The state of the s
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 Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the State of Indiana, Groom 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 Filed and recorded in accordance with the laws of the State of Indiana this Signed Official Designation Signed	HENDRICKS COUNTY ISSUED BY ORDER OF COUNTY	RT. A marriage license having been refused to the above named parties, th
RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the day of 19 on thousand nine hundred and 10 county of 10 county. State of Indiana, Groom and 10 county of 10 county. State of Indiana, Groom and 10 county of 10 county. State of Indiana, Groom and 10 county of 10 county. State of Indiana, Groom and Indiana, Groom and Indiana Indiana, Groom and Indiana, Groom Indiana, G	in	Court by written order issued and file
Be It Remembered, there was filed in my office a marriage license issued by the clerk of the HENDRICKS Circ Be it further remembered, the following marriage certificate was filed in my office, to-wit: one thousand nine hundred and State of Indiana, Groom 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 Filed and recorded in accordance with the laws of the State of Indiana this Signed Official Designation Signed Signed Signed Signed	Too de la constance	of a marriage license to the above named parties
of Indiana dated the		
Be it further remembered, the following marriage certificate was filed in my office, to-wit: I	we di Kemembered, there was filed in my office a marriage lice	and MARRIAGE CERTIFICATE
I, hereby certify that on the day of State of Indiana, Groom at County of County, State of County. Signed Official Designation Signed Signe	of Indiana dated the day of day of	ense issued by the clerk of the HENDRICKS Circuit Cou
I, hereby certify that on the day of State of Indiana, Groom at County of County, State of County, State of 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 HENDRICKS Filed and recorded in accordance with the laws of the State of Indiana this. Signed Official Designation Signed Signed Signed Signed Signed Signed	Be it further remembered the following	and , 19 authorizing the joining together as husband and wi
one thousand nine hundred and hereby certify that on the day of State of Indiana, Groom of County of County of 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 HENDRICKS Dated this day of Signed Official Designation Signed Signed Signed Signed Signed Signed Signed	I. Rayald and a following marriage certificate was filed in my	office, to-wit:
and, Bride	one thousand vine but 1 1 7	nereby certify that
and, Bride	State of Indiana Comments	at and also the day of March
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		
County. Dated this	The state of the s	Comment of the commen
Filed and recorded in accordance with the laws of the State of Indiana this	County of a marriage license issued for	County, State of
Filed and recorded in accordance with the laws of the State of Indiana this. Signed Official Designation day of Signed	Dated this	that purpose by the Clerk of the Circuit Court of HENDRICKS
Filed and recorded in accordance with the laws of the State of Indiana this. Signed Official Designation day of Signed Signed	day of 19 %	s)
Signed Signed Read Read Read Read Read Read Read Re		Simul D
The state of the s	Filed and recorded in accordance with the laws	Official Designation
The state of the s	the state of Indiana this	26 Marter J
The state of the s		Signed Way of March 19
HENDRICKS Circ		The state of the s
		HENDRICKS Circuit Cou

India	Prescribed By na State Board of n under Authority
	31-1-3-2 tive July 1, 1977

Dated this

day of 50%, 1981.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	45	
		-

7-	81	

HENDRICKS _County

ile		
4. In	4 10	0
Datasery	11/1/	1
Date of April	ication	

MALE Medical Examination Report Dated /- 30-8/	FEMALE Medical Examination
Name of Physician T. Duerweiler, Ind.	Medical Examination Report Dated 1-30 - 8/ Name of Physician 7. Lucywell. ml
DE ANGWEDED 10 21 1 2 6 proposited 4D 1	Name of Physician / Trierwelle, md.
ALL QUESTIONS MUST BE ANSWERED. IC. 31-13-35 prescribed. False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)", shall be fined in any sum not exceeding five hundred dollars (\$500,00)",	ever procures the issuance of a license to marry by any false statement, representation or pretense
First Middle A Last	Name Final APPLICANT
Name mark Edward Cote	Elizabeth Middle 12 Last
Date of Birth 3 196	Date of Birth Month Day Year
Place of Birth (State or foreign dountry)	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
The to the state of the state o	- R. K. # 1 Box 149 pettsboy So.
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of high worlfield by Date of high worlfield
Date of birth states	Date of birth verified by: Birth Certificate Uddicial Decree
Other (Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No Yes	If answer is "yes", has the adjudication been removed? No□ Yes□
Are you related to the female applicant closer than second cousin? No. Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Ves No Ves	3. Are you related to the male applicant closer than second cousin? No □ Yes □ 4. Are you now under the influence of intoxicating liquor? No □ Yes □
5. Are you now under the influence of a narcotic drug? No Yes O	5. Are you now under the influence of a narcotic drug? No 💆 Yes 🗆
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father allowed Walph Catterns of the Catt	compliance with any court order or orders issued for their support. 8. Full name a father fa
Mangiel In	D.H. har
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Matthe Elaine Juger	9. Full maiden name of mother Martifla Jean filerilla
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Mills of Mills of the state
Birthplace of mother (State or foreign country) Allestone	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Section 1 Section 2 Sectin 2 Section 2 Section 2 Section 2 Section 2 Section 2
county of	County of County
Signed Wah & Co	Signed Lizaball Tradge
New Address 1 1 10 × 149 Pi #5 borgo	New Address PPP BOX 129 PHS boso
Subscribed and sworn to before me this	Subscribed and sworn to before me this day of fluidity, 19
May Jane Russell Clerk HENDRICKS Circuit Court	Mry Jane Kusself Clerk HENDRICKS Circuit Court
Cierk Court	The state of the s
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 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	signs, state facts which render the consent of the other parent unnecessary
and relate the consent of the other parent directors.	
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS
County of HENDRICKS ss:	Signed Phil Ridge Father
Signed Father	Signed Marthay Ridge Mother
Signed Mother	
Subscribed and sworn to before me this	Subscribed and sworn to before me this day of Clerk
Clerk	flath flath flather
	make having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	AT. A marriage license having been refused to the above named parties, the purt by written order issued. I day and filed of a marriage license to the above pamed parties.
authorizes and directs the issuance	/1 G
PETURN OF MARRIAGE LICENS	E AND MARRIAGE CENTRAL HENDRICKS Circuit Court
We I Remembered there was filed in my office a marriage licer	ise issued of
of Indiana dated the day of Taliana	Color & Strains,
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
1, Shaman Essel	hereby certify that on the
one thousand nine hundred and State of India	at County, State of County
01 III010ma (1-	C L. Ctate of Samme
one thousand nine hundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS HENDRICKS
were by me united in marriage as authorized by a marriage license issued for County.	that purpose of the country
Dated this	Leas comes of

Official Designation.....

.... Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

42 2-4-87 Date of Application

Marie Russell HENDRICKS

.....Circuit Court

Form Prescribed By Indiana State Board of	APPLICATION FOR MA	ARRIAGE LICENSE	2-4-81
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of Application
		FEMALE Medical Examination Report	Dated
MALE Medical Examination Report Dated	1-30-81	Les isian Mery	eld / sugemocia
Name of Physician Lomas L. ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-shall be fined in any sum not exceeding five hundred d	calker	Name of Thysics	cry by any false statement, representation or pretense
Name of Physician	-3-6 prescribed "False statement - Whoever	r procures the Issuance	LE APPLICANT
ALL QUESTIONS MUST BE ANSWERED. IC. STA- shall be fined in any sum not exceeding five hundred d MALE APPLICAN		O First	Middle Past
Name First / Middle	Wood	Date of Birth Month	Das Vear
Date of Birth Month Day	Year 3	Place of Birth (State of foreign country)	Ondiana:
Place of Birth (State or foreign (country)	Singa)	Residence Address Street or R.	
Residence Address Street or R. R. City	State . State .	MI Dot 19, Willes	ally Minericas Suciana
Pol 2 Bod 300, Danvelle,	Munica 4 Jan	Previous Marital Status: Never Married Last Marriage Ended By: Death Divorce	OR Annulment
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by: Birth Certifica	te 🛘 Judicial Decree
Date of birth verified by: Birth Certificate Judicial Dec	ecree	V	license Wpicture
Dener (Specify) Quil's license	W/picture	Other (Specify) 1. Are you now or have you ever been adjudg	ged to be of unsound mind? No Yes□
1. Are you now or have you ever been adjudged to be of unsound	d mird? No X Yes \	If answer is "yes", has the adjudication bee	en removed?
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	No Yes 🗆	 Are you afflicted with a transmissible dise Are you related to the male applicant close 	ease? Not Yes Not Yes Not Yes
3. Are you related to the female applicant closer than second cou	usin? No Yes No Yes	Are you related to the male applicant close Are you now under the influence of intoxic	icating liquor?
4. Are you now under the influence of intoxicating liquor?	No Yes O	5. Are you now under the influence of a narc	cotic drug?
Are you now under the influence of a narcotic drug? List the full names of any dependent children.		6. List the full names of any dependent child	Iren.
A 10000 A 10000			
		7. Are you required by any court order or or	rders to support the above
7. Are you required by any court order or orders to support the dependent children?	e above No Ves U	dependent children?	110 100
If answer is "yes", it is required that this Application be accom-		If answer is "yes", it is required that this A compliance with any court order or order	Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their su 8. Full name of father August Augus August August August August August August August August August A	el Wood	8. Full name of father Lene	Roak Posey
Residence of father (if deceased so state) LL 2 Box	300, Danville, Ind.	Residence of father (if deceased so state)	El / Dot 197 Wanuelle, Shot
	noligna	Birthplace of father (State or foreign count	ndiana si
9. Folimaiden name of mother Judith Kay	Downan	9. Full maiden name of mother //4	witha Frances Willow
Pesidence of mother (if deceased so state)	ne	Residence of mother (if deceased so state)	Dame
Birthplace of mother (State or foreign country)	noliana	Birthplace of mother (State or foreign coun	
State of Indiana, HENDRICKS Sa: I de in	epose and state the information given this application is true and correct.	State of Indiana, County of HENDRICKS	ss: I depose and state the information given in this application is true and correct.
Signed Michael	Byon Wood	Signed C	hustined, Posey
New Address 4923 RE	rekulle Rd John	New Address 49	23 Rockville Rd. Us
Subscribed and sworn to before me this	lay of £16.	Subscribed and sworn to before me this	s 4 day of Feb., 198
Mary Jane Russell Ge	HENDRICKS Circuit Court	Mary Jan Ku	SSELL Clerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT	OD CHARDIAN
We, the parents, of this applicant hereby give consent	for this marriage. If only one parent		beby give consent for this marriage. If only one parent
signs, state facts which render the consent of the other	er parent unnecessary		nsent of the other parent unnecessary
State of Indiana, County of HENDRICKS } ss:		State of Indiana,	
	Father	County of HENDRICKS	S8:
	Father Mother		Fathe
Subscribed and sworn to before me this			Mothe
	Clerk		is day of 19
			Cler
HENDRICKS County	COUR	CT. A marriage license having be	een refused to the above named parties, th
inaı	uthorizes and directs the issuance of	of a marriage license to the above	and file
KH	ETT HA OF MADDIAGE		
of Indiana dated the	a same ticer	ase issued by the clerk of the	HENDRICKS Circuit Cour
Dood & Jestin M.	510	, 19 8/, authorizin	HENDRICKS Circuit Country of the joining together as husband and wil
1 Kenneth Wetter	raige certificate was filed in my o	office, to-wit:	Posly
		Core ou certifin that	
State of Indiana, Groom Muchael	l. B. Wood	of then I sude	day of John County of County, State of
County	a by a marriage license issued for	that meet	County, State of Circuit Court of HENDRICKS
Dated this day of	19		
		Official D	uette V. 3 Sten
Filed and recorded in accordance with the le	aws of the State of Indiana this	Official Designation	rotac

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

46 42 2-4-87 Date of Application

.Circuit Court

1-	FEMALE Medical Examination Report Dated 2-3-87
MALE Medical Examination Report Dated 1-30-8/	
In the state of th	Name of Physician Kerland A. Sugameller
Name of Physician 10 ANSWEDED 10 31.1.3.6 prescribed "False statement—Who	ever procures the issuance of a license to marry by any false statement, representation or pretens
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Afirst Meddle Alast
Name First Middle Wood	Date of Birth Month Day
Date of Birth Month Day	Place of Birth (State of foreign country)
Place of Birth (State or foreign country)	Hillian
Residence Address Street or R. R. City County State .	Residence Address Street or R. R. State
The a pay soo, number, promising some	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
	11/2
Other (Specify) Occulis lidense W/ Proture	Other (Specify) Others Seems hypicature 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes No Yes No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C If answer is "yes", has the adjudication been removed? No O Yes C
to the state of th	2. Are you afflicted with a transmissible disease. No Yes C
2. Are you afflicted with a transmissible disease? No Yes No Ye	3. Are you related to the male applicant closer than second cousin? Not Yes C
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Yes C
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No. Yes C
6. List the full names of any dependent children.	6. List the full names of any dependent children.
L. Brancis	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No Ves O
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 3. Full name of father Many Wood	compliance with any court order or orders issued for their support.
1882 863	o. Full harmeof father works
Residence of father (if deceased so state) XX X POLITION, WULLING MAN.	Residence of father (if deceased so state) The 1 Ref 197, Wandle, Mol
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Fyll maiden name of mother Julith Kay Downan	9. Full maiden name of mother Watha Trumes Wilson
Residence of Nos ML	Production and mather differenced so state; Dame
Birthr	
State of	tion given
County	correct.
I, Jackiel K. Wood	honoby give
	,hereby give my consent for
Subscrib my Son Muchael Buy	and Wood to
	the state of the s
marry Chus Pasey	
CONSE	
Ve, the	edil K Word
igns, st i Subscribed and worn to before me	TANK TO THE PERSON OF THE PERS
JO SCHMITT	19 Of Oth 19
NOTARY OF INDIANA	. 100
MY COMM	ough & Schutt
ISSUED THE	Notary Public
County of	
Signed	
Father	Signed
Signed	Father
ıbseril 19	Signed Mother
	Subscribed and sworn to before me thisday of19
OMP	Clerk
I. Deorge michael Wood	the
- wood	hereby give my consent for
my 50N, michael BRy	Collsent for
Ina marry Chia Poses	to to
mus forey	urt
e it	ife
Sen.	1 4 ()
subscribed and guarantee	ge m. Wood
ate subscribed and sworn to before me	his 74
NOTAKT PUBLIC STATE OF INDIANA	day of ter 1981
MY COMMISSION SYNDER	Political III
ated ISSUED THRU INDIANA NOTARY ASSOC.	ozeah) chit
	Molary Public
led and recorded in accordance with the laws of the State of Indiana this	
S	Signed Masse To
	HENDRICKS Court Court
	HENDRICKS Circuit Court

Medical Examination Report Dated 1-27-81

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No	47
File	42

County 2-4-81 Date of Application FEMALE

Medical Examination Report Dated___ Name of Physician Chomas Mr. Walker Name of Physician Thomas M. Walker ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense MALE APPLICANT FEMALE APPLICANT atond. Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree 1. Are you now or have you ever been adjudged to be of If answer is "yes", has the adjudication been removed: No Tes D If answer is "yes", has the adjudication been removed No T Yes 2. Are you afflicted with a transmissible disease? 2. Are you afflicted with a transmissible disease? No Yes O 3. Are you related to the female applicant closer than second cousin's No Yes 3. Are you related to the male applicant closer than second cousin? Ne Yes 4. Are you now under the influence of intoxicating liquor No Yes 4. Are you now under the influence of intoxicating liquor? Ne Yes Are you now under the influence of a narcotic drug! No Yes O 5. Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children 6. List the full names of any dependent children 7. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No Yes No Yes O If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support. 8. Full name of father M. Howard Thomas Full name of father Ralph Curtis Kiduel Residence of father (if deceased so state) Shollana Residence of father (if deceased so state) endiana Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country)_ State of Indiana. HENDRICKS County of ... 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 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of Signed. 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, 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..... Feb., 19.8%, authorizing the joining together as husband and wife of Indiana dated the ... and Shila Jeanson Kidwells Be it further remembered, the following marriage certificate was filed in my office, to-wit: Hollis 5. M. Ilea hereby certify that on the at Brownsburg, County of. one thousand nine hundred and 8 State of Indiana, Groom Dwest Scott Thomas of Hand and, Bride Shalls Jeanson Kalwell of Hand 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 .. , 19.81 Official Designation

APPLICATION FOR MARRIAGE LICENSE

Jana Ressell
HENDRICKS

.. Circuit Court

Form Prescribed By Indiana State Board of APPLICATION FO	NICKS County Date of April 1981
Health under Authority HEN	NDRICKS County Date of Application
Effective July 1, 1977	FEMALE Medical Examination Report Dated 23-8/
MALE 1-23-8/	Name of Physician Kathlien Beck Com
MALE Medical Examination Report Dated Athlun Beck Con The special Property of the Control of t	Name of Physician / february by any fulse statement representation
Name of Physician Atlaun frage "False statemen	Name of Frightenery (nt-Whoever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed Tallow All QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed Tallo	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name First L Farmand Live It	Date of Birth Month
Day Year	Place of Birth (State or foreign country)
Date of Birth	fred,
Place of Birth (State or foreign country) Street or R. R. County State	
Residence Address Street or R. R. Swandshurg &	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Morrioge Ended By: Death Divorce Annulment C
Mariago Ended By: Death Divorce Annument	Date of birth verified by: A Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Other (Specify) # 113-61-027464
Other (Specify) A type of the state of the s	N. D
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No D	N. O. v. D.
If answer is "yes", has the adjudication been removed?	No Vyes 2. Are you afflicted with a transmissible disease?
2. Are you afflicted with a transmissible disease?	Nes 3. Are you related to the male applicant closer than second cousin? No Vyes
3. Are you related to the female applicant closer than second cousin? No	N P(D
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug?	Yes 5. Are you now under the influence of a narcotic drug? No Yes 5.
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No Yes
dependent children?	1es dependent condition
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you compliance with any court order op orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Albert Sweet	8. Full name of father Shelbie Sharp
Residence of father (if deceased so state) Brownshurg, In.	Residence of father (if deceased so state) Draws hurg, the
\ \land	Birthplace of father (State or foreign country)
Birthplace of father (State or foreign country)	9. Full maiden name of mother Thomas Mo Wothy
9. Full maiden name of mother.	
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information gives
State of Indiana. County of HENDRICKS ss: I depose and state the information in this application is true and co	
cernt B furt	Day on Regard
Signed & Pin Oak Browned	ing 102 & Pin Bala Brownster
New Address Oak Tito	New Address 2 20h 1081
Subscribed and sworn to before me this day of HENDRICKS	Subscribed and sworn to before me this day of HENDRICKS Circuit Court
Clerk TIENDRICKS Circuit	t Court A and Analy Gerk HENDRICKS Circuit Cour
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	
signs, state facts which render the consent of the other parent unnecessary	
,	signs, state facts which render the consent of the other parent uniteressity
State of Indiana	
State of Indiana, County of HENDRICKS ss:	State of Indiana,
,	County of HENDRICKS
	Dig ned
Signed	Mother Signed Moth
Subscribed and sworn to before me thisday of, 1	19 Subscribed and sworn to before me this
COMPLETE IF MARRIAGE LICENSE ISSUED DO	
HENDRICKS County	F COURT. A marriage license having been refused to the above named parties, the
in authorizes and directs the is	COURT. A marriage license having been refused to the above named parties, to court by written order issuedand file
PETUDA OF STATE	ssuance of a marriage license to the above named parties.
of Indiana dated the day of da	LICENSE AND MARRIAGE CERTIFICATE
of Indiana dated the	dige ticense issued by the clerk of the HENDRICKS Circuit Con-
Be it further remembered the fill	, 19.30, authorizing the joining together as husband and we
1, Dennie of Contracte was filed	in my office, to-wit:
one thousand nine hundred and	and County of County, State of S
State of Indiana, Groom Marrit Bernard	at Brownshing Country of Hend
and, Bride Dawn Ras Share	County State of Ord
County a manning 1:	County State of
Dated this	sued for that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of day of	, 198
Filed and recorded in accordance with the laws of the State of Indiana	Official Designation Musical
- Indiano	ta this

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	4	19	
File_			
	-		CVI VI

HENDRICKS

Circuit Court

MALE MALE MALE MALE MALE MALE MALE MALE	Date of Application
Medical Examination Report Dated 1-26-81	FEMALE Medical Examination Report Dated 1-26-81
Name of Physician . Roball, M. A.	New Art /
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Wheel he fined in any sum not exceeding five hundred dallars (\$2.00 to 10.00).	Name of Physician Z. Zorall, M. D.
MALE APPLICANT	Il issuance of a license to marry by any false statement, representation or pretense
Name & First Middle O Last	Name OF State APPLICANT
Date of Birth Month Day Year	Middle Middle
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Mattern St.	Place of Birth (State or foreign country)
302 Wester, Brownshug, Head.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	Sal A. Indiana, Danville, Herd., In.
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
& Other (Specify) Sturey Lic.	D. J. J.
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) Whereis Lie. wel pecture
If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No. Yes 5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
Christini Lenn	6. List the full names of any dependent children.
Alexander Ala	Kichael andrew
is ugg in well	
7. Are you required by any court and a count	
 Are you required by any court order or orders to support the above dependent children? No □ Yes 	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father filelle Romald Robbits, Ja.	8. Full name of father Hugh Wilford Wlaner
Residence of father (if deceased so state)	Residence of father (if deceased so state) Danville, In.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Indiana
9. Full maiden name of mother Engeligth Unn Illuman	9. Full maiden name of mother Weola Francisco
Residence of mother (if deceased so state) Slaunfully to	Residence of mother (if deceased so state) Canrille II.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Indiana
State of Indiana,	State of Indiana, I depose and state the information given
County of HENDRICKS sa: in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
Signed Y Can W Roberty	Signed Llune S. Wilson
New Address 339 N. Indiana	New Address 339 N. Jalean Mannella
Subscribed and sworn to before me this 5th day of Jel. 1984.	Subscribed and sworn to before me this 5th day of tel., 1981
Mary Jane Rusself Clerk HENDRICKS Circuit Court	Mary Jane Russell Glerk HENDRICKS Circuit Court
Cierk 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 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	signs, state facts which render the consent of the other parent unnecessary
	State of Indiana
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
	SignedFather
Signed Father	Signed
SignedMother	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	
TE MARKIAGE LICENSE ISSUED DI ORDER OI	T. A marriage license having been refused to the above hamed parties, the
HENDRICKS	ourt by written order issued
inauthorizes and directs the issuance of	of a marriage license to the above named parties.
in authorizes and directs the issuance of	of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS
in authorizes and directs the issuance of RETURN OF MARRIAGE LICENS	ourt by written order issued
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the	E AND MARRIAGE CERTIFICATE the se issued by the clerk of the se issued by the clerk of the joining together as husband and wife
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the	E AND MARRIAGE CERTIFICATE the se issued by the clerk of the se issued by the clerk of the joining together as husband and wife and Dane (1900)
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of a Be it further remembered, the following marriage certificate was filed in my of	The state of the above named parties. E AND MARRIAGE CERTIFICATE Asse issued by the clerk of the see issued by the clerk of the pointing together as husband and wife the state of the see issued by the clerk of the s
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my office.	E AND MARRIAGE CERTIFICATE the see issued by the clerk of the
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the	The series of the above named parties. E AND MARRIAGE CERTIFICATE The series issued by the clerk of the series is the
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licent day of the following marriage certificate was filed in my of the	The series of the above named parties. E AND MARRIAGE CERTIFICATE Use issued by the clerk of the series is
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the	The series of the above named parties. E AND MARRIAGE CERTIFICATE Use issued by the clerk of the series is
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my office and some thousand nine hundred and state of Indiana, Groom one thousand nine hundred and state of Indiana, Groom ond, Bride were by me united in marriage as authorized by a marriage license issued for County.	The state of the above named parties. E AND MARRIAGE CERTIFICATE The se issued by the clerk of the cle
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licent day of	The series of the above named parties. E AND MARRIAGE CERTIFICATE The series is used by the clerk of the

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

APPLICATION FOR MARRIAGE LICENSE

2-6-8 Date of Application

HENDRICKS

.... Circuit Court

rm Prescribed By diana State Board of salth under Authority HENDRICKS	S County Date of Application
Halla Under Authority L.C. 31-1-3-2 Fective July 1, 1977	FEMALE Medical Examination Report Dated 1-30-81
	41. 4
MALE Medical Examination Report Dated 1-30-8	
Name of Physician	Name of Physician. ver procures the issuance of a license to marry by any false statement, representation or pretent statement. The statement of a license to marry by any false statement, representation or pretent ver procures the issuance of a license to marry by any false statement, representation or pretent ver procures the issuance of a license to marry by any false statement, representation or pretent ver procures the issuance of a license to marry by any false statement, representation or pretent ver procures the issuance of a license to marry by any false statement.
Name of Friysician.	FEMALE APPLICANT
LL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed all be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	First
MALE APPLICANT Middle	Name Month Day Year
ame First Year	Date of Birth
ate of Birth Month	Place of Birth (State or toreign country)
ace of Birth (State or foreign country)	Residence Address Street or R. R. City County State
sidence Address Street or R. R. City County State	1935 Syphist Judges, Wa
Box 54 tologram Ind.	Previous Marital Status Never Married OR
evious Marital Status: Never Married OR	Previous Marital Status Last Marriage Ended By Death Divorce Annulment Date of birth verified by Birth Certificate Judicial Decree
Divorce Annulment	Date of birth verified by Birth Certification
ate of birth verified by: Birth Certificate Judicial Decree	A Other (Specify) Drivers fire w/ pist
9 Other (Specify) Driver fix years No # Yes -	1 Are you now or have you ever been adjudged to be of unsound mind? No Y
Are you now or have you ever been adjudged to be of unsound mind:	If answer is "yes", has the adjudication been removed No U
If answer is "yes", has the adjudication been removed?	a Are you afflicted with a transmission
Are you afflicted with a transmissible disease?	3 Are you related to the male applicant
Are you related to the female applicant closer than second cousin?	4 Are you now under the initiaence of
Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug? Are you now under the influence of a narcotic drug?	5. Are you now under the initiative
List the full names of any dependent children.	6. List the full names of any dependent children
	Janay Menday
to support the shave	7. Are you required by any court order or orders to support the above No D
Are you required by any court order or orders to support the above No Yes dependent children?	dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court order or orders assued for their support.
compliance with any court order or orders issued for their support.	8 Full name of father Randing Shows
Full name of father Roles to John Color of the Color of t	Residence of father (if deceased so state)
Residence of father (if deceased so state)	
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother words they Housell	9. Full maiden name of mother.
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
	Birthplace of mother (State or foreign country)
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	State of Indiana. I depose and state the information
County of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS
Signed Dall Farrett	Signed I I QUI I QUI
New Address Doy 54 Lugar and 46149	New Address BOX 59 Linton
Subscribed and sworn to before me this day of Jab 1981.	Subscribed and sworn to before me this day of Sub
	W W DEVIDENCE
Mary Jame Rande Clerk HENDRICKS Circuit Court	II any fore therest der under con
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
	the second secon
State of Indiana,	State of Indiana,
County of HENDRICKS S8:	County of HENDRICKS
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day of , 19	
	Subscribed and sworn to before me this day of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COL	URT. A marriage license having been refused to the above named part
County	Count 1
in authorizes and directs the issuance	e of a marriage license to the above
RETURN OF WARDY CO	
of Indiana dated the Ather was filed in my office a marriage li	NSE AND MARRIAGE CERTIFICATE icense issued by the clerk of the HENDRICKS Circum
of Indiana dated the Lath day of February	cense issued by the clerk of the HENDRICKS Circum., 19.8./, authorizing the joining together as husband a
Be it further remembered the fall.	and Mary Jewsby
I	y office, to-wit:
one thousand nine hundred and S.	mereby certify that on the
State of Indiana, Groom Pales T.	at Indels County of Marien
and, Bride Oak Oak	of Headrickson County of Tod
were by me united in marriage as outh	for that
County. County.	for that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of Zeb, 19	El
., 19	Signed J b. Kaviet
Filed and recorded in accordance with the least	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	a la day of Est

Form Prescribed By Indiana State Board of Health under Authority of LC 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRIC	County 2-6-8/
MALE Medical Examination Report Dated 2-6-8/	Date of Application
O /	Medical Examination Report Dated 2 6-8/
Name of Physician A Migemaller	4
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—When the line of the statement in any sum not exceeding five hundred dollars (\$500 gas).	oever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	Il associate of a license to marry by any false statement, representation or pretense
Name First Middle / Last	Name Final APPLICANT
Date of Birth Month Day Year	Middle 41, Last.
Place of Birth (State or foreign country) / 25	Date of Birth Month Day Year
Street on B. B. Cold	Place of Birth (State or foreign country)
Residence Address Street or R. City County State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	- Sod clim flainfield In.
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Dudicial Decree
Other(Specify)	Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	Other(Specify)
If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease? No ☐ Yes ☐	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Ves
3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease? No Yes 3. Are you related to the male applicant closer than second cousin? No Yes 3.
4. Are you now under the influence of intoxicating liquor? No Ves Yes	4. Are you now under the influence of intoxicating liquor? No Pes D
 5. Are you now under the influence of a narcotic drug? No ☐ Yes ☐ 6. List the full names of any dependent children. 	5. Are you now under the influence of a narcotic drug? No Yes
U. District on and any experience of the control of	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No D Yes D
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Donald Hetchrock	8. Full name of father UM. Charles Lilliapie
Residence of father (if deceased so state) Slother for	Residence of father (if deceased so state) Danyelle In
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Tare Tohlmoise	9. Full maiden name of mother Jayre P. Kauth
Residence of mother (if deceased so state) Bulker & Sur,	11000
	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana,	Birthplace of mother (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.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
The first from	Harri Nillangie
New Address 502 ELM PLAINFIELD	Signed Som My - Dain high
1 7 9	New Address 20 1 - Fall 8
Subscribed and sworn to before me this day of HENDRICKS	Subscribed and sworn to before me this day of HENDRICKS
Mary full Haself Clerk HENDRICKS Circuit Court	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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which fender the constitution and other particles.
State of Indiana,	State of Indiana, HENDRICKS Security of
County of HENDRICKS ss:	County of
Signed Father	SignedFather
Signed Mother	Signed Mother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 19
	Clerk
Clerk	A LL the above newed portion the
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
in authorizes and directs the issuance o	f a marriage license to the above named parties.
THE PRINCE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of
of Indiana dated the day of day of	. Kan & Hillespie
The state of the s	nd
Be it further remembered, the following marriage certificate was filed in my of the state of the	hereby certify that on the day of day of
one thousand nine hundred and 8	at County of County of
State of Indiana, Groom Ded & Hitchese	of County, State of
one thousand nine hundred and 8. State of Indiana, Groom Ded & Hitchear of and, Bride South State of Were by the state of	Hend HENDRICKS
of the united in marriage as suthamized by a marriage license tooker for	하면 하면 하는 내가 내가 내내내 하는 것 같아 가는 사람이 되었다. 내가 되었다면 하는 사람이 다른 사람이 하는데 다른 사람이 하는데
Det 1	Contide of a
	19 Jan of Self
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Mary Jone Ressell Clerk HENDRICKS Circuit Court
the accordance with the laws of the State .	armed III land the land to the land the land to the la

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

Date of Application

orm Prescribed By Indiana State Board of APPLICATION	N FOR MA	ARRIAGE LICENTY	7st	Application
lealth under Authority	HENDRICKS	County	Date of	Application
ffective July 1, 1977		FEMALE instign Report Dated	1 /-	28-81
1-78-81		Medical Examination Report Dates	1 Forest	2
MALE Medical Examination Report Dated		Name of Physician	10000	
Medical Examination Report Dated Name of Physician ALL QUESTIONS MUST BE ANSWERED I.C. 31-1-3-6 prescribed "False state of the property of t		procures the issuance of a license to marry 6x	any false statement, r	representation or pretense
Name of Physician Programmer Avews RF10 C, 31-1-3-6 prescribed "False st	atement-Whoeve	FEMALE A	PPLICANT	
ALL QUESTIONS MUST BE ANSWERED (A.C. 31-1-34) processor with the fined in any sum not exceeding five hundred dollars (\$500,00)".		First	Middle	Le Last
MALE APPLICANT	Last	Name Ilargance	Day	Year
Name First Middle (Folly Vear)	1-	Date of Birth Month	13	1935
Date of Birth Month Day	7	Place of Birth (State or foreign country)	her.	
Place of Birth (State or foreign country)		Residence Address Street or R. R.	Ony	County State
City County	State Fut	1156 W. Jane	prener	le the
Residence Address Street or R. R.	1411	Previous Marital Status: Never Married OR		
Previous Marital Status: Never Married OR		Death U Divorce	nnulment U	
Lest Marriage Ended By: Death Divorce Annulment		Date of birth verified by: Birth Certificate	Judicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree		X1.4	Junal	/
Ala Zinonali		Other (Specify) 1. Are you now or have you ever been adjudged to b	e of unsound mind?	No 🖾 Yes 🗆
is a day be of ungoing mind.	No Yes O	Are you now or nave you If answer is "yes", has the adjudication been rem	oved."	No□ yes□
and?	No Xes	2. Are you afflicted with a transmissible disease		No □ Yes □
i di diagga?	No D Yes D	Are you related to the male applicant closer than	second cousin"	No D Yes D
3. Are you related to the female applicant closer than second cousin?	No No Yes D	4 Are you now under the influence of intoxicating	liquer?	No D Yes D
4. Are you now under the influence of intoxicating liquor?	No Wes D	5. Are you now under the influence of a narcotic dr	ug"	No 🖾 Yes 🗅
5. Are you now under the influence of a narcotic drug?	No - 1es	List the full names of any dependent children.		
6. List the full names of any dependent children.				
(pmes Coder				
The state of the s				
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or orders to	support the above	No□ Yes□
dependent children?	No Yes O	dependent children? If answer is "yes", it is required that this Applica	tion be accompanied by	satisfactory proof that you are in
If answer is "yes", it is required that this Application be accompanied by satisfactory proof	f that you are in	compliance with any court order or orders issue		
compliance with any court order or orders issued for their support.	- 1	8. Full name of father A. Lee	Castell	
8. Full name of father UM: Cally		4	muy le	Su.
Residence of father (if deceased so state) Meckasia		Residence of father (if deceased so state).	H	7
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	100	, , ,
9. Full maiden name of mother Horely Blacketter		9. Full maiden name of mother	+ XJaca	en
Mauren the 11	2	Residence of mother (if deceased so state)	deciasa	1
Residence of mother (if deceased so state)			Tim	ec -
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country). State of Indiana,	I denose and	state the information given
State of Indiana, HENDRICKS Ss: I depose and state the info in this application is true	e and correct.	County of HENDRICKS	ss: in this appli	cation is true and correct.
County of		Y	minu o	Lorm
Signed Max & Cook	01 +0	Signed 1/11/	1 2 de	annolus Ho
New Address 1149 Indiangoo's Road	Greenlesty	New Address	A STATE OF THE STA	11 9
Subscribed and sworn to before me this day of	192/.	Subscribed and sworn to before me this	day of	T. L. 19. O.f.
Mary and Massell Clerk HENDRICKS	Circuit Court	Mase & pre the	Olerk HE	NDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR G	UARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If o	only one parent	We, the parents, of this applicant hereby g	ive consent for this !	marriage. If only one parer
signs, state facts which render the consent of the other parent unnecessary		signs, state facts which render the consent		
				· ACTO - B. SETT - CO. B. (A. C.
State of Indiana,		State of Indiana,)	
County of HENDRICKS ss:		County of HENDRICKS	88:	
ែរ Signed	Father	Signed		Fath
Signed				Moth
Subscribed and sworn to before me this		Signed		man a libera estembara e Ada ajurum a este a esta a este a
		Subscribed and sworn to before me this	day of	19
	Clerk			Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORD	ER OF COL	DT A		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORD HENDRICKS County	ER OF COU	RT. A marriage license having been r	efused to the ab	ove named parties,
	to the !	Court by written order issued		and fi
inauthorizes and direct	ts the issuance	of a marriage license to the above nam	ed parties.	
RETURN OF MARR	RIAGE LICEN	SE AND MARRIAGE CERTIFICATE		
				Circuit Co
of Indiana dated the	11/11/11/11/11			er as husband and w
Be it turther remembered the following maning a	······································	and the	140 N	
one thousand nine hundred and 3	jwod in my	hereby		
		hereby certify that on the	in a Am	<i>Y</i>
one thousand nine hundred and State of Indiana, Groom Och Cody	***************************************	at preveable	, County o	marty tr
and, Bride Stans	- 6	La Malla Maria	County, State of	1 Dra
State of Indiana, Groom South State	cense inacci	- Al	County, State	1 Vd.
were by me united in marriage as authorized by a marriage lie County.	tssued fo	er that purpose by the Clerk of the Circu	it Court of	HENDRICKS
Dated this day of Sh				
		Signed Elann	D. Smith)
Filed and recorded in accordance with the laws of the State of	f 7 1)	Official Designation M. M.	eter	
the the ways of the State of	Indiana this	aday of \$	Down	1801
		Signed	I and we	00
			1 1	ORICKS Circuit Co
		***************************************	. 164 46	Circuit .

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

42 File_

MALE	$\frac{2-6-81}{2}$
Medical Examination Report Dated	FEMALE Date of Application
Name of Physician	Medical Examination Report Dated 2-2-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (8500,00)".	Dever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	
Name First Middle Last	Name Find
Date of Birth Month Day Year	Kila (D. Middle (1) Last
Place of Birth (State or foreign country)	Date of Birth Month Pay Year
	Place of Birth (State or Greign country)
Residence Address Street or R. R. City County State	Residence Address AStreet or R. R. Malano
	755. East St. Walrack Whole to County State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Date of birth vermed by. — Birth Certificate — Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other(Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Ves V	Other (Specify) Drugos hoense W/picture
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No O Yes O	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
Are you related to the female applicant closer than second cousin? No Ves U	3. Are you related to the male applicant along the
Are you now under the influence of intoxicating liquor? No D Yes D	4 Are you now under the influence
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a record to the
List the full names of any dependent children.	6. List the full names of any dependent children.
	Michael Jan Marry
	Diana Da na di
	- cume for frigers 2
Are you required by any pourt order or order.	
Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court-order or orders issued for their support.
Full name of father	8. Full name of father fames battick Mules
Residence of father (if deceased so state)	11.1.
Birthplace of father (State or foreign country)	Residence of father (if deceased so state) Walland, Shalland
	Birthplace of father (State or foreign gountry)
Full maiden name of mother	9. Full maiden name of mother Unlendia Mae Clevenger
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	(Partia . a)
tate of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct.
New Address Discribed and sworn to before me this day of HENDRICKS Clerk HENDRICKS Circuit Court ONSENT OF PARENTS, PARENT OR GUARDIAN Te, 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 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
ns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
ate of Indiana,	State of Indiana, The Property of the Property
anty of HENDRICKS ss:	State of Indiana, HENDRICKS County of
Signed Father	SignedFather
	Signed Mother
Signed Mother	
oscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	C. A marriage license having been refused to the above named parties, the
HENDRICKS County Cou	irt by written order issued
authorizes and directs the issuance of	a marriage license to the above named parties.
DETUDN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
Be at Bomombored there was fled in my office a marriage licens	e issued by the clerk of the
Indiana dated theday of	
it further remembered, the following marriage certificate was filed in my of	d
h.	expluse restifus that on theday of,
thouse 1	1
lie of I 1:	
d, Brideof	County, State of,
re by me united in marriage as authorized by a marriage license issued for thunty.	out purpose by the Clerk of the Circuit Court of HENDRICKS
ted this, 19	
day of, 19	Signed
0	ficial Designation 19 19
led and recorded in accordance with the laws of the State of Indiana this	day of

Signed

HENDRICKS

... Circuit Court

Clerk

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS _County 6-81 MALE Date of Application Medical Examination Report Dated. FEMALE Medical Examination Report Dated. Name of Physician_ Name of Physician ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "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 FEMALE APPLICANT Middle Last Date of Birth Month Place of Birth (State or foreign country) Residence Address Street or R. R. Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment D Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify)____ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No□ Yes□ is "yes", has the adjudication been removed? No Yes STATE OF INDIANA DR. HAUGHN #766 PREMARITAL EXAMINATION CERTIFICATE (IC 31-1-1-7) LABORATORY STATEMENT OF STANDARD BLOOD TESTS This is to Certify that the following tests were performed on a blood specimen submitted in the LELA MYERS name of ____ 75 S. East St No O Yes O _; Sickle Cell Anemia __; Rubella Immunity (females) _ . Laboratory _ and Rh factor -INDIANAPOLIS MEDICAL LAB., 8501 ZIONSVILEE ROAD Only laboratories approved by the Indiana State Board of Health shall make premarital serological tests. (IC 16-1-11-11) PHYSICIAN'S EXAMINATION REPORT City Wabash _ State _ Indiana To Clerk of the Circuit Court: This is to Certify that I, James Haughn. M.D.
holding an unlimited license to practice medicine in the State of Indiana
have even incd the applicant to practice medicine in the State of Indiana have examined the applicant named in the laboratory report above and in my opinion, the person named therein is not infected with syphilis, or if so infected, that the stage of the disease is not such that it could be communicated by the person. Where it applies. I have complainted the stage of the disease is not such that it could be and Rh factor test the person. Where it applies, I have explained the significance of the sickle cell anemia, rubella, and Rh factor test results. If the test was not done the reason is indicated below. Syphilis Sickle Cell Anemia ☐ Applicant objects on religious grounds Physician does not believe it necessary; ☐ Applicant objects on religious grounds. Rubella (Females only) Applicant objects on religious grounds; ☐ Applicant is over 50 years of age; Father ☐ Applicant presents evidence of sterilization; Mother Applicant presents laboratory evidence of previous test declaring her immunity. Rh (Males and Females) Applicant objects on religious grounds; ☐ Applicant is female over 50 or male over 60 years of age; ☐ Applicant is itemale over 50 or male over 50 years of a composition;
☐ One of the applicants presents evidence of sterilization;
☐ Applicant presents laboratory evidence of a previous Rh test;
☐ Applicant is a male and the female has the Rh positive factor. es. the and filed 645 N. Spring St. _Address _ ircuit Court Wabash, IN 46992 Applicant's Signature and and wife This certificate form S.B.H. 43-005 is valid for only thirty days from date blood was drawn. Applicant must present it to the County Clerk within this period of time. See Reverse Side for Instructions State Form 23904R S.B.H. 43-005 Rev. 5/80

Official Designation.

Signed ..

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

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

File_ 2-6-81 Date of Application

..... Circuit Court

. 01	FEMALE Medical Examination Report Dated 2-6-8/
MALE Medical Examination Report, Dated 2-6-8/	4 1 1 2 2 - 1 [[1]
Medical Examination Report Lacon Aller	Name of Physician Py Sugmouth
Name of Physician William Whote Traise statement - Whote	ever procures the issuance of a license to marry by any the
L QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed Transcribed	Name of Physician ever procures the issuance of a license to marry by any false statement, representation or pretens FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
ame First Middle Mathew	Date of Birth Month Day Year
te of Birth Month Day Year	
te of Birth (State or foreign country)	Place of Birth (State or foreign country) Maia napolis Sind Country State
Grook Indiana County State	Residence Address # Street or R. A. Pettsborn In
dence Address At Street or R. B. City County Address Address At 2 Autor	Married D'OR
evious Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
st Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
te of birth verified by: Birth Certificate Judicial Decree	
Device Prince and	Other (Specify) William Luciuse w/p
Other (Specify) AVIAVO A LCCOMPLE No Yes O	1. Are you now or have you ever been adjudged to be of unsound mind?
Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes C No Yes C No Yes C
Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No ☐ Yes ☐ 4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
Are you now under the influence of intoxicating liquor? No Yes Yes	4. Are you now under the influence of intoxicating indox 5. Are you now under the influence of a narcotic drug? Noth Yes C.
Are you now under the influence of a narcotic drug:	Are you now under the influence of a label of the first the full names of any dependent children.
List the full names of any dependent children.	U. MISS VIII.
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support. Full name of father august 10 at hew	8. Full name of father Ronald Shirrell
Residence of father (if deceased so state) & inton In.	Residence of father (if deceased so state) Pitts bow In
On dial and	V = b
Birthplace of father (State or foreign country) Malana	Birthplace of father (State or foreign country)
Full maiden name of mother 1 Jarilyn 1 Jarie Xaly	9. Full maiden name of mother 4 1
Residence of mother (if deceased so state) Juguer 1	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country). Snarana
tate of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.	State of Indiana, Country of HENDRICKS as: I depose and state the information gives in this application is true and correct
County of HELLONICAS AND CONTROL	County of TIEINDRICKS
Signed & Jany Maller	Signed Ly Drecy & Shurrell
New Address RIVBOL 242 Jahr	New Address Pl Box 242 Asyton
subscribed and swarn to before me this the day of It 1981	Subscribed and sworn to before me this & the day of July 18/
Mary Jone Aussell Clerk HENDRICKS Circuit Court	Mary Jane Busselberk HENDRICKS Circuit Cour
, J V	CIrcuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
Ve, 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 paren
igns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary.
	tender the consent of the other parent unnecessary
tate of Indiana, HENDRICKS ss:	State of Indiana,
ounty of	
	County of HENDRICKS
Signed Father	County of HENDRICKS ss:
	County of HENDRICKS ss: Signed Father
Signed Mother	County of HENDRICKS ss: Signed Father Signed Mother
Signed Mother abscribed and sworn to before me this day of , 19	County of HENDRICKS ss: Signed Father Signed Mother
Signed	County of HENDRICKS Signed Father Signed Mothe Subscribed and sworn to before me this day of 19
Signed Mother subscribed and sworn to before me this day of 19 Clerk	County of HENDRICKS Signed Fathe Signed Mothe Subscribed and sworn to before me this day of 19 Cler
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF	County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF	County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County Co	County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties.
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County Consults and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF	Signed
Signed Mother Subscribed and sworn to before me this day of 19	County of HENDRICKS Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued and file of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE These issued by the clerk of the HENDRICKS Circuit Court
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
Signed Wother Washeribed and sworn to before me this Complete IF Marriage License Issued By Order Of Court Hendricks County Authorizes and directs the issuance of Return Of Marriage License Issued in my office a marriage licent day of Authorizes and directs was filed in my office a marriage licent day of Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Indiana date	County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued and file of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit County, 19 St., authorizing the joining together as husband and wiften to fire, to writ:
Signed Mother ubscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County Comparing and directs the issuance of authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COUF BY ORDER OF COUF AUTHORIZED BY ORDER OF COUF AUTHORIZED BY ORDER OF COUF AUTHORIZED BY ORDER OF COUF BY ORDER OF COUF AUTHORIZED BY ORDER OF COUF AUTHORIZED BY ORDER OF COUF BY ORDER OF COUF AUTHORIZED BY ORDER OF COUF BY ORDER OF COUF BY ORDER OF COUF AUTHORIZED BY ORDER OF COUF BY ORDER OF COU	County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued and file of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit County, 19 St., authorizing the joining together as husband and wiften to fire, to writ:
Signed Wother Washeribed and sworn to before me this Complete IF Marriage License Issued By Order Of Court Hendricks County Authorizes and directs the issuance of Return Of Marriage License Issued in my office a marriage licent day of Authorizes and directs was filed in my office a marriage licent day of Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Authorizes and directs the issuance of Indiana dated the Indiana date	Signed Signed Mother Subscribed and sworn to before me this day of 19. Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued and files of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court, 19. The property of the HENDRICKS Circuit Court and the positive of the substantial and wife forms.
Signed Wother Washeribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE For It Remembered, there was filed in my office a marriage licenty for Indiana dated the day of day of the following marriage certificate was filed in my office and my office and my office and my office and marriage certificate was filed in my office and my office and marriage certificate was filed in my office and marriage was	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the pourt by written order issued and files of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court, 19 St., authorizing the joining together as husband and wife office, to-wit: Thereby certify that on the day of Service of Land Court
Signed wbscribed and sworn to before me this day of 19	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the pourt by written order issued and files of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court, 19 St., authorizing the joining together as husband and wife office, to-wit: Thereby certify that on the day of Service of Land Court
Signed where the second and sworn to before me this day of 19	Signed
Signed Mother where the seribed and sworn to before me this day of 19	Signed
Signed Mother abscribed and sworn to before me this day of 19 Clerk Complete IF Marriage License Issued by Order of Courty Hendricks County Completes and directs the issuance of authorizes and directs the issuance of Indiana dated the day of day of the it further remembered, the following marriage certificate was filed in my office a marriage license of the indiana dated that the following marriage certificate was filed in my office and the indiana dated of Indiana, Groom the day of the indiana, Groom the day of the following marriage discrepancy of the indiana, Groom the day of the indiana, Groom the day of the following marriage day of the indiana, Groom the day of the following marriage day of the indiana, Groom the day of the following marriage day of the following mar	Signed Father Signed Mother Subscribed and sworn to before me this day of 19. Clerk CT. A marriage license having been refused to the above named parties, the pourt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE has is issued by the clerk of the HENDRICKS Circuit Court of County, State of County, State of County, State of County, State of HENDRICKS County of County of County of County of County, State of County, State of County, State of HENDRICKS
Signed Mother Abscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Comparing the second of the	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerical Subscribed and 19 Clerical Sub
Signed Mother ubscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Company of the second directs the issuance of the second directs the second directs	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerical Subscribed and 19 Clerical Sub
Signed Mother abscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Comparing the second of the	Signed
Signed where the second and sworn to before me this day of 19	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Cler RT. 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. RE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court of County, State of HENDRICKS Signed Mother Signed Mother Entremediate Mother Entremediate Mother Signed Mother Entremediate Mother

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

File__

	County 2-10-81
MALE Medical Examination Report Dated 2-9-81	FEMALE Date of Application
Name of Physician James Black, M. D.	Medical Examination Report Dated 2-9-81
ALL OUESTIONS MUST BE ANSWERED 10 31 136	Name of Physician James Black M. 11.
ALL QUESTIONS are a statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	Dever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	
Name Solin Reflect & Last	Name / Farst
Date of Birth Pay Year	Date of Birth Months Male Wright
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. Gity County State	Place of Birth (State or foreign country)
AR Springuelle June Incl	Residence Address Street or R R Sity County State
Previous Marital Status: Never Married OR	Joursburg In
Last Marriage Ended By. Death Divorce Annulment D	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Nrivero Lie W/Pic	Ω - I
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) Nowers dec Wifei
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible to
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No D Yes 5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No 22 Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
	The Carl and Carlotte
	The state of the s
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
3. Full name of father William Mable Sipes	8. Full name of father Everall D. Owen
Residence of father (if deceased so state) Clocks and	Residence of father (if deceased so state) oliceosal
Birthplace of father (State or foreign country) Indiana	Birthplace of father (State or foreign country) Andiona
Full maiden name of mother Madie Mede Williams	9. Full maiden name of mother alpina Burris
Residence of mother (if deceased so state) Olon, Andiona	Residence of mother (if deceased so state) slices good
Birthplace of mother (State or foreign country) Ancliona	Lucia
State of Indiana, I denote and state the information gives	State of Indiana, County of HENDRICKS Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct.
County of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
Signed Signed	signed I da m. Wright
New Address 315 Hornaday Rd. Brownburg, N.	New Address 315 Hornarday Road
Subscribed and sworn to before me this 10 day of Feb. 1981.	Subscribed and sworn to before me this day of Judy 50012
Many Long Russell HENDRICKS	Mary Lone Russell Clerk HENDRICKS Circuit Court
Clerk ILLIANICKS Circuit Court	Cierk Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
Ve, 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
igns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana, Sounty of HENDRICKS	State of Indiana, County of HENDRICKS ss:
ounty of	County of the co
Signed Father	SignedFather
Signed Mother	Signed
abscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
	having been refused to the above named parties, the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above hames parties, the
HENDRICKS County Criedic Cou	art by written order issued. 3 day Waw and filed
Circuit Court & Boles authorizes and directs the issuance of	a marriage license to the above was a
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens	e issued by the clerk of sutherizing the joining together as husband and wife
Indiana dated the day of day of	thought what
e it further remembered, the following marriage certificate was filed in my of	fice, to-wit:
Sex ald (D. W) les	The sale of the A River
thousand nine hundred and	County State of Ind
ate of Indiana, Groom Solve K. Sipos	f. County State of Quel
d, Bride Oals Mae Wright of	f. County, State of Och County, State of HENDRICKS hat murpose by the Clerk of the Circuit Court of HENDRICKS
ou me united:	ini pai poor o
	1 00 7 11/1000
day of, 19	Signed Signation 19.8
	The state of the s
	17
	official Designation

APPLICATION FOR MARRIAGE LICENSE

56 2-10-8| Date of Application

Your Russell HENDRICKS

Form Prescribed By Indiana State Board of APPLICATION FOR	MARRIAGE LICENSE
of I.C. 31-1-3-2	KS County Date of Application
Effective July 1, 1977	FEMALE Propert Dated 2 - 6 - 8
MALE 2515-701	Medical Examination Report Dates
Medical Examination Report Dated	Name of Physician Edward
Name of Physician Courses Wh	oever procures the assuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement" and shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name First Middle	Date of Birth Month Day Fear
Date of Birth Month Day Year	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	A B City County
Residence Address Street or R.R. City County State	Residence Address Street of R. R. State
4829 Squire Dr. Ind pls.	Previous Marital Status. Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree
	Other (Specify) Drusers Nie, w Rest.
Other (Specify) Davies his affect of program mind?	1. Are you now or have you ever been adjudged to be of unsound mind" No Yes I
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed. No Vest
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No Vest
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin" No X Yes C
4. Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes	4. Are you now under the influence of intoxicating liquor. No No Yes 5. Are you now under the influence of a narcotic drug. No Yes No Yes
5. Are you now under the influence of a narcotic drug.	Are you now under the introduction of the full names of any dependent children.
6. List the full names of any dependent children.	
Eugenth Weally	
Magla Weekley	
	7 Are you required by any court-order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children? No Yes	dependent children No Pyer
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
2. I di liante vi actie	8: Full name of father
Residence of father (if deceased so state)	Residence of father (if decreased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Dunie & Chaplin	9. Full maiden name of mother Samuel Shall Shall
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS 88: I depose and state the information given in this application is true and corpect.	State of Indians, County of HENDRICKS as: I depose and state the information give in this application is true and correct
Enmy to the land the	County of TILIVERICKS
Signed 4229 SQL PA AA AT A	Signed Ana D. Expless
New Address 4829 Squise ar Judgels.	New Address 4829 Squar Dr. Andp
Subscribed and sworn to before me this	Subscribed and sworn to before me this day of , 19
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS Circuit Cour
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
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
the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	The state of the s
	the second secon
State of Indiana	
State of Indiana, County of HENDRICKS ss:	State of Indiana,
Signed	County of HENDRICKS
Father	Signed Fathe
Signed Mother	Signed Mothe
Subscribed and sworn to before me thisday of19	Subscribed and sworp to be for
Clerk	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF TAXABLE	The state of the s
HENDRICKS County	RT. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance	ourt by written order issuedand file
DEMUDA	marriage license to the above named parties
be it Remembered them and controlled LICENS	SE AND MARRIAGE
Be it further remembered, the following marriage certificate was filed in my	nse issued by the clerk of the HENDRICKS Circuit Countries, 19 %, authorizing the joining together as husband and wif
I will thereby and the my	office to-anit.
one thousand nine hundred and S	hereby certify that on the
State of Indiana, Groom Exect & Desplay	at Julals any of Hard
state of Indiana, Groom and Bride and, Bride and, Bride as authorized by a marriage license issued for Dated this.	hereby certify that on the day of County of County, State of
County. County.	that County, State of Jud
were by me united in marriage as authorized by a marriage license issued for Dated this	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19. \(\sqrt{2}	
Filed and recorded in accordance with the laws of the State of Indiana to	Official Designation The State Horseless
with the laws of the State of Indi	Official Designation

Clerk

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

140	

File_	

Date of Application

MALE Medical Examination Report Dated. FEMALE Medical Examination Report Dated. Name of Physician_ Name of Physician. ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense." MALE APPLICANT FEMALE APPLICANT am Date of Birth Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound mind? No Ves D 1. Are you now or have you ever been adjudged to be of ur If answer is "yes", has the adjudication been removed? No Yes D No D Yes D If answer is "yes", has the adjudication been removed: 2. Are you afflicted with a transmissible disease? No V Yes 2. Are you afflicted with a transmissible disease No D Yes D 3. Are you related to the female applicant closer than second cousin? No W Yes 3. Are you related to the male applicant closer than se 4. Are you now under the influence of intoxicating liquor? No D Yes D No D Yes D you now under the influence of intoxicating liquor No D Yes D 5. Are you now under the influence of a narcotic drug? No E Yes 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 6. List the full names of any dependent children Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above dependent children No TYes dependent children' If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) State of Indiana, 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, State of Indiana, HENDRICKS HENDRICKS Father Signed. 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, the Court by written order issued... authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the... , 19. The suthorizing the joining together as husband and wife of Indiana dated the... day of File and Descel in J. Thomas Ht Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 21 day of 4h one thousand nine hundred and.... State of Indiana, Groom. Q of Hand 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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

File
Feb 13,1981
Date of Application

	FEMALE Medical Examination Report Dated 2-13-81
MALE Medical Examination Report Dated 2-/3-8/	Name of Physician Monuel Largaespada
Name of Physician Manuel Largoespada	Name of Physician
The ANGENIER TO 31-1-3-6 prescribed "False statement"	never procures the issuance of a license to marry by any false statement, representation or pretens
shall be fined in any sum not exceeding the	FEMALE APPLICANT
MALE APPLICANT Name First (Middle	Name Deore Koy Littrell
Richard & Hunt	Date of Birth Month Sept. 25 1941
Date of Birth Quant 30 1937	Place of Birth (State or oreign country)
Place of Birth (State or foreign country)	Residence Address Street Ir R. R. City County State
Residence Address Street or R. R. City County State	RA#2 Box 4/2 Flangille, Ind
KK 1 130 / 10 10 100 100 100 100 100 100 100 10	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment	Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Last Marriage Ende
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Dina dia ulleia	Other (Specify) Diwers Sie W/Pie
Other (Specify) Other (Specify) No Yes No Yes	 Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes.
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No□ Yes
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease. No □ Yes
3. Are you related to the female applicant closer than second cousin? No Yes No Yes	3. Are you related to the male applicant closer than second cousin? No ☐ Yes 4. Are you now under the influence of intoxicating liquor? No ☐ Yes
4. Are you now under the influence of intoxicating indust.	4. Are you now under the influence of a narcotic drug ^o No □ Yes
 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 	6. List the full names of any dependent children.
Richard of Hunt of 3	Borbara M. Ott 12
1. A Wast	David Magnes 6
one K. Auni	_ Nones wages
	7. Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children? No № Yes □	7. Are you required by any court order or orders to support the above dependent children? No No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support
8. Full name of father Leon J. Num	8. Full name of father Welliam J. Petting
Residence of father (if deceased so state) Successful	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Mollows.	Birthplace of father (State or foreign country)
9. Full maiden name of mother Worda D. Jove	9. Full maiden name of mother Julia a Luponece
Residence of mother (if deceased so state) Indianapolis, Ind.	Residence of mother tif deceased so state) Plainfield, Ind.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana,
County of Introduction in this application is true and correct.	County of HENDRICKS as: in this application is true and correct
Signed Ruckard & Juni	Signed heave X. Lillely
New Address RR 1 Bod 19k Lamille John	New Address PR 1 Box 196 & anville
Subscribed and sworn to before me this day of Jeb 198/	Subscribed and sworn to before me this / 3 day of Feb 1987
Many Jane Russell Clerk HENDRICKS Circuit Court	Mary Your Rusself Gerk HENDRICKS Circuit Cour
CONSENT OF PARENTS PARENTS OF COLUMN	
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS ss:	State of Y. V.
County of TIETADRICKS	State of Indiana, County of HENDRICKS
SignedFather	
	Signed Father
Moth	
Signed Mother Subscribed and sworn to before me this day of	Signed Mother
Subscribed and sworn to before me this	Signed Mother
Subscribed and sworn to before me this	Signed Mother Subscribed and sworn to before me this day of 19
Subscribed and sworn to before me this day of 19	Signed Mother Subscribed and sworn to before me this day of 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	Signed Mother Subscribed and sworn to before me this day of 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Significant County County Significant County Coun	Signed Mother Subscribed and sworn to before me this day of 19 Cler T. A marriage license having been refused to the above named parties, thourt by written order issued 3 day Mainer and file
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in John C. Mowing RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE	Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the curt by written order issued 3 clay Walker and filed of a marriage license to the above named parties.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in John C. Marriage County Signiff authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE	Signed Mother Subscribed and sworn to before me this day of 19 Cler T. A marriage license having been refused to the above named parties, thourt by written order issued 3 and file of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in John C. Marriage County Signiff authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE	Signed Mother Subscribed and sworn to before me this day of 19 Cler T. A marriage license having been refused to the above named parties, thourt by written order issued 3 and file of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Super 2 Complete and directs the issuance of authorizes and directs the issuance of Indiana dated the day of day	Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued 3 clay Waiver and files of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE are issued by the clerk of the HENDRICKS Circuit Course, 1931, authorizing the jaining together as husband and wife
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Sypint 2 Co authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI of Indiana dated the 3 day of 4 Be it further remembered, the following marriage certificate was filed in my of the county of th	Signed Mother Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Super 2 Co authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE of Indiana dated the 3 day of day of Be it further remembered, the following marriage certificate was filed in my office a marriage licen of the following marriage certificate was filed in my office and the state of Indiana dated and State of Indiana County Super 2 County Super 3 County Super 3 County Super 4 Indiana day of State of Indiana County Super 3 County Super 3 County Super 4 Indiana day of State of	Signed Mother Subscribed and sworn to before me this day of 19. CIT. A marriage license having been refused to the above named parties, the part by written order issued 3 day 1 warren and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE ase issued by the clerk of the HENDRICKS Circuit Course of the series of the pointing together as husband and wife and office, to-wit: hereby certify that on the day of the day
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in John C. Moures RETURN OF MARRIAGE LICENSI RETURN OF MARRIAGE LICENSI of Indiana dated the 3 day of Be it further remembered, the following marriage certificate was filed in my of one thousand nine hundred and State of Indiana, Groom Clerk County Applied And Order County Applied And Order County Applied County Appl	Signed Mother Subscribed and sworn to before me this day of 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Spirit Co authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI RETURN OF MARRIAGE LICENSI of Indiana dated the 3 day of 3 Be it further remembered, the following marriage certificate was filed in my of the same of the	Signed Mother Subscribed and sworn to before me this day of 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in John C. Maurin Community of the second of the s	Signed Mother Subscribed and sworn to before me this day of 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Spire Complete and directs the issuance of authorizes and directs the issuance of Indiana dated the day of the following marriage certificate was filed in my office and	Signed Mother Subscribed and sworn to before me this day of 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Super County authorizes and directs the issuance of authorizes and directs the issuance of Indiana dated the day of day of the following marriage certificate was filed in my office and my office and my office and filed in my of	Subscribed and sworn to before me this day of 19. Cler CT. A marriage license having been refused to the above named parties, thourt by written order issued 3 (Vainer and file) and file of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE use issued by the clerk of the HENDRICKS Circuit Cour and file, authorizing the joining together as husband and wife infice, to-wit: thereby certify that on the day of County of County, State of County, State of County, State of County, State of HENDRICKS County of County of County of County of County of County, State of HENDRICKS
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Super County authorizes and directs the issuance of authorizes and directs the issuance of Indiana dated the day of day of the following marriage certificate was filed in my office and my office and my office and filed in my of	Subscribed and sworn to before me this day of 19 Cler CT. A marriage license having been refused to the above named parties, the purt by written order issued 3 (Vainer and filed a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE use issued by the clerk of the HENDRICKS Circuit Court and 1981, authorizing the joining together as husband and wife infice, to-wit: thereby certify that on the 3 day of 5 county of 5 county of 5 county, State of 6 county
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Super County authorizes and directs the issuance of authorizes and directs the issuance of Indiana dated the day of day of the following marriage certificate was filed in my office and my office and my office and filed in my of	Subscribed and sworn to before me this day of 19. Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Light Common authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI Of Indiana dated the day of	Signed Subscribed and sworn to before me this CIT. 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 asse issued by the clerk of the the joining together as husband and wife at the purpose by the Clerk of the Circuit Court of County, State of County, State of County, State of County, State of County of Hendricks Circuit Court County, State of County, State of County, State of County of Hendricks Circuit Court County of Hendricks Circuit Court County, State of County of Hendricks Circuit Court of Hendricks
Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Light Company County C	Subscribed and sworn to before me this day of 19. Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued 20. And filed a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE are issued by the clerk of the HENDRICKS Circuit Court of County, State of County, State of County, State of County, State of HENDRICKS Circuit Court of HENDRICKS County State of HENDRICKS Certain County State of County, State of HENDRICKS

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

_County

		di minutali i
File	42	
T 116	10	

MALE	Date of Application
Medical Examination Report Dated 2-13-81	FEMALE Medical Examination Report Days 1
Name of Physician R. Stegmaller	Medical Examination Report Dated 2-13-81 Name of Physician R. Steamelles
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement-When	Dever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle	FEMALE APPLICANT
June Dean Speak	Name First Middle
2	Date of Birth Month
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	and the second second
R 2 Danvelle	HALL & N. B. County State
Previous Marital Status: Never Married OK OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	Other(Specify)
If answer is "yes", has the adjudication been removed? No □ Yes □	1. Are you now or have you ever been adjudged to be of unsound mind? No 🎜 Yes □
2. Are you afflicted with a transmissible disease? No A Yes	If answer is "yes", has the adjudication been removed? No Yes
3. Are you related to the female applicant closer than second cousin? No 🖣 Yes 🗆	2. Are you afflicted with a transmissible disease? No □ Yes □ 3. Are you related to the male applicant closer than second cousin? No □ Yes □
4. Are you now under the influence of intoxicating liquor? No X Yes U	3. Are you related to the male applicant closer than second cousin? No ✓ Yes □ 4. Are you now under the influence of intoxicating liquor? No ✓ Yes □
5. Are you now under the influence of a narcotic drug? No No Yes O	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	THE RESIDENCE OF THE PROPERTY
7. Are you required by any court order or orders to support the above	
dependent children? No Ves C	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Full name of father John Spoars	8. Full name of father Bernard R. Porter
Residence of father (if deceased so state) Daniele, Vid.	Residence of father (if deceased so state) Dany le J. d.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother Lenewa Lawson	0,00
Personal and the second	9. Full maiden name of mother from the first t
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother State or foreign country	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
	20 Array - A. 1811 12 - 1873
Signed Jimmy Spears coatswill	Signed Patricia & Porter Cartequille
New Address Futnam County Line Bainbrie	New Address Putnam County Line Rd Baintriag
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me thisday of, 19,
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS 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 parent	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	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS Sss:
ounty of HENDRICKS se:	County of
Signed Father	Signed Father
	Signed
	Subscribed and sworn to before me thisday of, 19
ubscribed and sworn to before me thisday of, 19	Subscribed and should be seen and should be seen as a se
Clerk	
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS County	urt by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
authorizes and directs the issuance of	AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office, a marriage licen.	
day of day of	retof 3 sinites !
and the second of the second o	nd
Revold & M. Dagle	ffice, to-wit: hereby certify that on the
ne thousand nine hundred and The	it Danielle County of Para
tate of Indiana, Groom	County, State of Ded
nd, Bride Strike & Porter of	County, State of And HENDRICKS Hend Hendricks
ere by me united in marriage as authorized by a marriage license issued for t	hat purpose by the States
ounty.	i am , a
ated this day of 300 : 1981	signed Ronald Mc Dougle
	The institute of the second

Signed Many Jane Propell HENDRICKS

...Clerk

... Circuit Court

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

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File.				
	4.6	19	19	81
	Doto		17	0

HENDRICKS

.... Circuit Court

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Health under Authority of I.C. 31-1-3-2 HENDRICK	County Date of Application
Effective July 1. 1977	FEMALE Prost Dated 2-13-8/
MALE 9-13-8/	Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician & Werte W. Mawere AND.
Name of Physician Poblist a. Johnson	any false statement, representation or preten
Traine of Triple ANEWERED 1C 31-1-3-6 prescribed "False statement—Who	ever procures the issuance of a license to marry by any false statement, representation or pretent of the procure of a license to marry by any false statement, representation or pretent of the procure
ALL QUESTIONS MUST BE ANSWERED. IN A Shall be fined in any sum not exceeding five hundred dollars (8500,00)".	
MALE APPLICANT	Name First Middle (20 Last
Name First Middle Strackle	Date of Birth Month 2
Pate of Birth Month Day Year	Taro, J
26 1953	Place of Birth (State or foreign fountry)
ace of Birth (State or foreign country), Malanapolis County, State	Residence Address Street or R. R. City County State
esidence Address Street or R. R. 1 29 (Antisvelle) Sn	P. O Bog 15, amo, on.
The state of the s	Previous Marital Status: Never Married OR
revious Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
ast Marriage Ended By: Death Divorce Annulment Divorce birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
0	Mrivers License W P.
Other (Specify) Wrivers License w/p \$314-64395	Other (Specify) Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudication been removed? No□ Yes
If answer is "yes", has the adjudication been removed?	If answer is "yes . has the adjustation of the state of t
Are you afflicted with a transmissible disease?	2. Are you afficted with a second cousin? No D Yes
Are you related to the female applicant closer than second cousin?	Are you now under the influence of intoxicating liquor? Not Yes.
Are you now under the influence of intoxicating fiquor:	4. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of a narcotic drug? No Yes
Are you now under the influence of a narcotic drug:	6. List the full names of any dependent children.
List the full names of any dependent children.	
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support. Full name of father wanes G. Strake	compliance with any court-order or orders issued for their support.
/ I day of O	8. Full name of father
Residence of father (if deceased so state) Indiana	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) In diana	Birthplace of father (State or foreign country) Kentucky
Full maiden name of mother & occise ann Stephenson	9. Full maiden name of mother Betsy ann Chambers
Residence of mother (if deceased so state) and In.	1/1200 1
A	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Mollana	Birthplace of mother (State or foreign country)
tate of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sas: I depose and state the information give in this application is true and correct in the application in the same correct in
F) 0110+10	Sounty of
Signed Mary W Strat	Signed Barbara a Carter
New Address & R. 1 Box 139 Conterville In.	New Address R 1 Box 139 Contraville
ubscribed and sworn to before me this day of 19	Subscribed and sworn to before me this 23/1d day of Juliusty, 19
ary one Pussell Clerk HENDRICKS Circuit Court	mary Comment HENDRICKS
The state court	Circuit Cour
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
e, 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	We, the parents, of this applicant hereby give consent for this marriage. If only one parents
parent unitecessary	signs, state facts which render the consent of the other parent unnecessary
ite of Indiana,	
hendricks ss:	State of Indiana, County of HENDRICKS ss:
Signed	County of
Father	SignedFathe
Signed	
oscribed and sworn to before me this	Subscrib J . Moth
	Subscribed and sworn to before me thisday of, 19
Clerk	Cle
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULT	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County	1. A marriage license having been refused to the above named parties, the
authorizes and directs the investment	ourt by written order issued and file
PETUDA OF MALE	a marriage license to the above named parties.
Be It Remembered there was Chili	E AND MARRIAGE CERTIFICATION
Indiana dated the	HENDRICKS THE CLERK of the
Dans Co Strain	ase issued by the clerk of the HENDRICKS Circuit Country of the standard of the HENDRICKS Circuit Country of the forming together as husband and will be fice, to-wit:
e u jurther remembered, the following marriage certificate was filed in	and Landons and wing the joining together as husband and win
the field in my o	office, to-wit.
e thousand nine hundred and S	cond
ate of Indiana, Groom Soul D. Stall	at Ano County of Hand County, State of And
d, Bride Lallora Cartos	that purpose by the Clerk of the Circuit County, State of HENDRICKS
re by me united in marriage as authorized by a marriage license.	Hand County, State of Show
ted this	that purpose by the Clerk of the County, State of
ted this day of day of 19	that purpose by the Clerk of the Circuit Court of HENDRICKS
	C: C
led and recorded in accordance with the laws of the State of Indiana this	Official Designation Margaral Residen
the laws of the State of Indiana this	Official Designation Manual Andrews
	day -1

Form Prescribed By Indiana State Board of Health under Authority
of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR

OR MARDIAGE TTO	No
OR MARRIAGE LICENSE	
DRICKS	File

	County
MALE Medical Examination Report Dated 2-16-81	FEMALE Date of Application
Name of Physician Michael Deeley	Medical Examination Report Dated 2-18-81
Name of Physician / Lelley	Name of Division (Part Dated 2-18-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement - Wh	Name of Physician Michael Jelley
shall be fined in any sum not exceeding the number dollars (\$500,00)".	Name of Physician M school Jelley oever procures the issuance of a license to marry by any false statement, representation or pretense
Middles	
anthony Clan Incal	Name O First,
Date of Birth Month 2	Date of Birth Monda Mildle Last
Place of Birth (State or foreign country)	Day Volar
Indianapoles on.	Place of Birth (State or foreign country) 2 1962
Residence Address Street Wange 101 State	Residence Address Strept or R.R. City
Previous Marital Status: Never Married GOR	64 Total St. Warmille County State
Previous Marital Status Previous Previous Marital Status Previou	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by	Date of birth verified by: Birth Certificate Undicial Decree
Other (Specify)	# 46604
Are you now or have you ever been adjudged to be of unsound mind? No Yes O	Other(Specify)
If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐
10 - 1es 0	If answer is "yes", has the adjudication been removed?
is a selected to the formely applying to the selection of	2. Are you afflicted with a transmissible disease? No • Yes • No • Yes •
Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?
165	4. Are you now under the influence of intoxicating liquor?
5. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	No □ Yes □
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Full name of father James 6. Splass Sr.	compliance with any court order or orders issued for their support. 8. Full name of father Auch (August)
Residence of father (if deceased so state) Indiana	The state of the s
/)	Residence of father (if deceased so state) Wanvelle, Sn.
Birthplace of father (State or foreign country) Indiana	Birthplace of father (State or foreign country) Hentucky
Full maiden name of mother leman davena Schakel	11. 1
Residence of mother (if deceased so state) Wanvelle In.	9. Full maiden name of mother (Marly Faye 71) orres
	Residence of mother (if deceased so state) Wanyelle, In
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country) Hentucky
ate of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.
0-11 01 0	County of
Signed y Unthony Clan Spears	Signed & Lamonda Furg Curaca
New Address 6+ High St. Danvell and	New Address Cot high St. Danvil
bscribed and sworn to before me this 18 day of Jeb 1981	
γ_{α}	Subscribed and sworn to before me this day of Jeb , 1981.
July Jane Husselgerk HENDRICKS Circuit Court	mary Jane Russell Clerk HENDRICKS Circuit Court
NSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
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
ns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
te of Indiana	
	State of Indiana, Country of HENDRICKS } ss:
	State of Indiana, HENDRICKS County of
	SignedFather
Signed Signed Mother Mother	Signed Father Signed Mother
Signed Signed Mother	SignedFather
Signed Signed Signed Mother	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Father Signed Mother scribed and sworn to before me this day of	Signed
Signed Father Signed Mother Scribed and sworn to before me this day of 19	Signed
Signed Father Signed Mother Scribed and sworn to before me this day of 19 MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	Signed
Signed Signed Signed Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County authorizes and directs the issuance of	Signed
Signed	Signed
Signed Mother Signed MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County Countries and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE	Signed
Signed Signed Signed Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County County Authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE	Signed
Signed Signed Signed Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Remembered, there was filed in my office a marriage license Indiana dated the 23 M day of and	Signed
Signed Mother Signed Mother Scribed and sworn to before me this day of 19 MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the issued by the clerk of the joining together as husband and wife deep to the joining together as husband and wife deep to the with the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep together as husband and wife deep together togeth
Signed Signed Signed Mother Scribed and sworn to before me this Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Indiana dated the 2314 day of day of it further remembered, the following marriage certificate was filed in my office he	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the issued by the clerk of the joining together as husband and wife deep to the joining together as husband and wife deep to the with the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep to the joining together as husband and wife deep together as husband and wife deep together togeth
Signed Signed Signed Mother Scribed and sworn to before me this Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Indiana dated the 231d day of day of it further remembered, the following marriage certificate was filed in my office thousand thousand he	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the poining together as husband and wife a subscribed and wife the court is a subscribed and with the court is a subscribed and wife the court is a subscribed and wife the court is a subscribed and wife the court is a subscribed and with
Signed Signed Mother Signed Mother Scribed and sworn to before me this day of 19 MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the poining together as husband and wife a subscribed and wife deep certify that on the day of the county of the county of the county State of
Signed Signed Signed Signed Signed Signed Signed Signed Signed Mother Scribed and sworn to before me this Mother MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE Indiana dated the 23 Ma day of day of thousand nine hundred and the of Indiana, Groom Attack A	Signed Mother Subscribed and sworn to before me this day of 19. Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the poining together as husband and wife a certify that on the 23 day of the certify that on the 23 day of the county of the county of the county State of the co
Signed Signed Signed Signed Mother Scribed and sworn to before me this Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Indiana dated the Aday of Aday	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the poining together as husband and wife a nuthorizing the joining together as husband and wife deep certify that on the day of the poining together as husband and wife new certify that on the day of the number of th
Signed Signed Signed Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County County RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Indiana dated the Aday of Aday	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is sued by the clerk of the joining together as husband and wife the propose by the Clerk of the County, State of County, State of County, State of HENDRICKS County of HENDRICKS County of HENDRICKS
Signed Signed Signed Mother Scribed and sworn to before me this MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County County RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Indiana dated the Aday of Aday	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is sued by the clerk of the joining together as husband and wife the propose by the Clerk of the County, State of County, State of County, State of HENDRICKS County of HENDRICKS County of HENDRICKS
Signed Mother Soribed and sworn to before me this Mother Soribed and sworn to before me this Mother Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Soribed and sworn to before me this Clerk MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Indiana dated the 23 Ma day of Aday of Anti- thousand nine hundred and the of Indiana, Groom Anti- Bride by me united in marriage as authorized by a marriage license issued for the nty. and day of 19 Mother Mother	Signed
Signed Mother Soribed and sworn to before me this Mother Soribed and sworn to before me this Mother Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Soribed and sworn to before me this Clerk MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Indiana dated the 23 Ma day of Aday of Anti- thousand nine hundred and the of Indiana, Groom Anti- Bride by me united in marriage as authorized by a marriage license issued for the nty. and day of 19 Mother Mother	Signed
Signed Signed Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Mother Marriage License Issued by Order of Court HENDRICKS County County County County RETURN OF MARRIAGE LICENSE Indiana dated the Mother M	Signed

	Andrew Committee	
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STATE

R MARRIAGE LICENSE	File 42
RICKS County	Date of Application

Form Prescribed By Indiana State Board of Health under Authority of LC. 31-1-3-2 HENDRICE	KS County Date of Application
Effective July 1, 1977	FEMALE Medical Examination Report Dated
MALE A - 4 - 8/	
Medical Examination Report Dated	Name of Physician
Name of Physician	sever procures the issuance of a license to marry by any false statement, representation or preten
ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—who shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	Name of Thydronian procures the issuance of a license to marry by any false statement, representation or pretent procures the issuance of a license to marry by any false statement, representation or pretent procures the issuance of a license to marry by any false statement, representation or pretent procures the issuance of a license to marry by any false statement.
MALE APPLICANT	First Middle Last
Name First Middle Last	Name Day Pear
Date of Birth Month Day Year	Date of Birth Month
1 2 63	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	Rt 2 Box 278 Caylon
	Previous Marital Status: Never Married O OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: A Birth Certificate Judicial Decree
Date of Differ Verlines by 4 - 2000	Other (Specify)
Other (Specify)	1. Are you now or have you ever been adjudged to be of unsound mind? No 🗖 Yes
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed? No Yes
If answer is "yes", has the adjudication been removed.	2. Are you afflicted with a transmissible disease? No Yes
2. Are you afficted with a transmissible disease.	3. Are you related to the male applicant closer than second cousin? No Yes
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? Now Yes	4. Are you now under the influence of intoxicating liquor? No Yes
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Edward . Day	8. Full name of father the state of the stat
Residence of father (if deceased so state) Souton Ind.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Barrie J. June	9. Full maiden name of mother Marylaw & Ravellotto
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Santas La
	000
Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given	Birthplace of mother (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.	County of HENDRICKS Sa: I depose and state the information give in this application is true and correct the information give in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in this application is true and correct the information gives in the informa
Signed & David Boyd	Kathu Cath
30 = 3	Signed June 1997
	New Address KR 2 100X 2
Subscribed and sworn to before me this day of 200, 198	Subscribed and sworn to before me this day of to 1900, 1900
Mary Jane Russell Clerk HENDRICKS Circuit Court	Many Jame Russell Clerk HENDRICKS Circuit Cou
COMPANY OF PARENTS PARENTS OF SWITTER	
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one pare
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,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS
Signed	County of MENDRICKS
Father	Signed Charle & All Fath
Signed Mother	Signed A Malian E Charles Moth
Subscribed and sworn to before me this day of , 19	Subscribed and appear to the Subscribed and a
Clerk	W V C W
	Il Mary Jane Russel Cle
HENDRICKS COUNTY COUNTY	RT. A marriage license having been refused to the above named parties, the
in Mandrale Colonies and I	RT. A marriage license having been refused to the above named parties, the court by written order issued
	a mairiage license to the above
The At 20 amounts and the Marking Licens	SE AND MARRIAGE CO.
of Indiana dated the	SE AND MARRIAGE CERTIFICATE the inse issued by the clerk of the HENDRICKS Circuit Cou
David & Royd and of Therany	, 19 authorizing the joining to the day of
Be it further remembered, the following marriage certificate was filed in many	and authorizing the joining together as husband and wi office, to-wit:
1. Start D. Whenthey	and office, to-wit: hereby certify that on the day of county of towal county, State of county, State of that purpose by the Clerk of the Circuit County of HENDRICKS
one thousand nine hundred and S	at Honor and the day of Leb
and Pride & All Sound	of Hand, County of Hand
were by me wited in of	Hond County, State of Ind
County. County.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of Low 198	purpose by the Clerk of the Circuit Court of HENDRICKS
10 8	

Filed and recorded in accordance with the laws of the State of Indiana this day of Signed No. 18

Signed Si

......Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

2 - 18-81 Date of Application

Circuit Court

MALE Parent Pare	FEMALE Date of Application
Medical Examination Report Dated 2-14-81	Medical Examination Report Dated 2-16-81
Name of Physician Black	Name of Division Report Dated 2-15-81
ALL OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed *False statement, Wa	Name of Physician Blacke
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	
Name First Middle Hast	Name First Middle
Date of Birth Month Day Year	Date of Piller Jase
Place of Birth (State or foreign country)	Day Year
and.	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City Country
	1210 Winderlow City County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Druers die W pict	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	Other (Specify)
	1. Are you now or have you ever been adjudged to be of unsound mind?
	If answer is "yes", has the adjudication been removed? No□ Yes□
	2. Are you afflicted with a transmissible disease? No Yes D
the state of the s	3. Are you related to the male applicant closer than second cousin? No Yes
4. Are you now under the influence of intoxicating fiquor? No Yes 5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No Yes -
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
b. List the lan manies and any approximation of the land manies and the land manies are a land manies and manies are a land	6. List the full names of any dependent children.
	THE RESERVE OF THE PROPERTY OF
7. Are you required by any court order or orders to support the above	
dependent children? No□ Yes□	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Belly for Hambles	8. Full name of father Grederick O. alsha
Residence of father (if deceased so state) Deceased	Residence of father (if deceased so state) Supple. Ind.
Birthplace of father (State or foreign country)	
birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother former	9. Full maiden name of mother Junda C. Pawell
Residence of mother (if deceased so state) Alanda	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) and Alla.	Birthplace of mother (State or foreign country)
State of Indiana,	
County of HENDRICKS 58: In this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
- N Confeel and Confeel	and the Foliabetic
Signed & Nouglas I Vanilla	Signed Julie Mashire
New Address 10234 Bacara Mh	New Address VD 234 Bacaca Or
Subscribed and sworn to before me this \\ \day of \day of \\ \day of \\ \day of \day o	Subscribed and sworn to before me this day of day of 1987.
Mary fore Pustell Clerk HENDRICKS Circuit Court	Mary for Russell Clerk HENDRICKS Circuit Court
Citati cont	- Lead 1
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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the
State of Indiana, County of HENDRICKS sa:	State of Indiana, HENDRICKS
County of HENDRICKS	Father
Signed Father	Signed
Signed Mother	Signed Mother
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this day of 19	
Clerk	A STATE OF THE STA
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T A marriage license having been refused to the above named parties, the
HENDOU VC	int by written order issued
County O	for marriage license to the above named parties.
authorizes and directs the issuance of	1 a marriage
TOTAL TOTAL CONTROL	E AND MARKIAGE CENTILIZATION OF THE COLUMN O
Be It Remembered there was filed in my office a marriage licen	se issued by
of Indiana dated the day of day of	2 las Francisco Olohier
Caralas & Hambelow	nu
Jurther remembered, the following marriage certificate was filed in my o	hereby certify that on the day of
one thousand nine had been dead	C to State of
one thousand nine hundred and State of Indiana, Groom Suglas R. Handler	County, State of
were by me united in marriage as authorized by a marriage license issued for County.	County, State of County, State of HENDRICKS
were by me united in marriage as authorized by a marriage license issued for	
Dated this day of 500, 1961	111 6
	Official Designation 198
Filed and recorded in accordance with the laws of the State of Indiana this	2 day of
will record 1'	Signed Mary Mes Res HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS Circuit Court

form Prescribed By Indiana State Board of Itealth under Authority HENDRICKS	County Date of Application
f LC. 31-1-3-2 ffective July 1, 1977	
	FEMALE Medical Examination Report Dated 2-16-81
MALE Medical Examination Report Dated	Dhysician James Mack, M.A.
Medical Examination Conus Black AID.	Name of Physical Ver procures the issuance of a ficense to marry to any false statement, representation or pretense FEMALE APPLICANT
Name of Physician. Whose RED LC, 31-1-3-6 prescribed "False statement - Whose	ver procures the issuants
	FEMALE AFFLICASI
MALE APPLICANT Mittelle Mittelle	Name Hancy to Moan
ame anthony hay Vear	Date of Birth Month 08 1959
ate of Birth Month 23 1960	Place of Birth (State or foreign country)
lace of Birth (State or foreign country)	Residence Address Super of R. B. City County State
esidence Address Street or R. R. City Pround Lung	no or war
5 A 4 & GREEN BOR	Previous Marital Status Never Married OR Last Marriage Ended By: Death O Divorge Annulment O
revious Marital Status: Never Married OR ast Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Dandiscast Decree
ate of birth verified by: Birth Certificate Judicial Decree	
	Other (Specify)
Other (Specify) No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No	1 Are you now or have you ever been adjudged to be of unsound mind" No Yes! If answer is "yes" has the adjudication been removed" No Ves!
If answer is "yes", has the adjudication been removed?	2 Are you afflicted with a transmissible disease" No Yes
Are you afflicted with a transmissible disease?	3 Are you related to the male applicant closer than second cousin" No. Yes
8. Are you related to the female applicant closer than second cousin. No Yes	4 Are you now under the influence of intoxicating liquor" Night Yes Night Yes Night Yes Night Yes Night Yes
5. Are you now under the influence of modulating regions of the influence of a narcotic drug?	5. Are you now under the interest of
5. List the full names of any dependent children.	Matthew Wayne Warner
	Maurin ways
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
. Are you required by any court order or orders to support the above	7 Are you required by any court order or orders to support the above dependent children" No D Yes
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any nouri order or orders assued for their support
Full name of father Warrey	* Full name of father Newman G:
Residence of father (if deceased so state) Browns buy	Residence of father sif deceased so states
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother Myrra Udany	9. Full maiden name of mother Toldie Marie Della
Residence of mother (if deceased so state) Brownslung In.	Residence of mother of deceased so state: Dibuschung, Fr.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Indiana
State of Indiana. HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indians. HENDRICKS 3 depose and state the information of in this application is true and corn
County of HENDRICKS In this application is true and correct.	County of The Voltage of County of C
Signed & Mallowy Cay Carrier	Signed X 7 WYCY 90 UWX
New Address 775 NATIONAL PINCE	New Address & SCHELLY RC DROWNS
Subscribed and sworm to before me this Other day of John 19	Subscribed and sworn to before me this / St. day of the 188
1 Jary Janu H usell Clerk HENDRICKS Circuit Court	Mary Jane Kussell Own HENDRICKS Circuit Co
CONSENT OF PARENTS PARENT OF CHARDIAN	
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 parents
ights, state facts which relider the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	The state of the s
	The state of the s
	The state of the s
State of Indiana, County of HENDRICKS ss:	State of Indiana,
	County of HENDRICKS
Signed	Signed Fa
Signed Mother	Signed Mc
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this day of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLU	DT A
HENDRICKS County C	RT. A marriage license having been refused to the above named parties,
authorizes and directs the issuance	of a marriage ligandary and
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice of Indiana dated the	onse issued by the clerk of the HENDRICKS Circuit C
Onthony R. day of March	and land authorizing the joining together as husband and
Be it further remembered, the following marriage certificate was filed in my	and followit:
, perple by Warn	office, to-wit:
one thousand nine hundred and State of Indiana, Groom Sunday Roy Roy South	at at that on the day of March
and Bride Dane Com Lucia Age April 2009	of Hond Country of Hand
State of Indiana, Groom. And Andrew Royal Control of State of Indiana, Groom. And Andrew Royal Control of State of Indiana, Groom. Of State of	County, State of
a duthorized by a marriage lies.	County State of Dio
Dated this day of Connection, 198	HENDRICKS HENDRICKS
	Sinual C
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
was of the State of Indiana this	Designation (January)

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

__County

7.6.19.1981 Date of Application

MALE Medical Examination Report Dated 2-16-21	FEMALE Date of Application
Name of Physician Sandall Strate	Medical Examination Report Dated 2-16-81
	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false data.
MALE APPLICANT	
Name Any Sustant / 1 - Jast	Name First
Date of Birth Month Day Year	Date of Birth Month Sue Smith
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 1957
Residency Address Street or R. R. Conney State	
It 18 Dax 130-0 Trapportend In	Residence Address Street or R. R. City County State
Previous Marital Status Never Married OR	Previous Marital Status: Never Married DOR
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) W.A. Sychuse	Other (Specify) As Lucius
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	1 Are you pay or have
If answer is "yes" has the adjudication been removed? No O Yes O	If answer is "yes", has the adjudication been removed? No Yes
2. Are you afflicted with a transmissible disease? No Yes 3. Are you related to the female applicant closer than second cousin? No Yes Ves	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Tes D	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	Are you now under the influence of a narcotic drug? No No
	and the state of any dependent emigren.
	THE REPORT OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO
7. Are you required by any court order or orders to support the above	
dependent children? No□ Yes□	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father.	compliance with any court order or orders issued for their support.
9	8. Full name of father lagary Smith
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother analysis and all the state of mother and the state of mother and the state of t	9. Full maiden name of mother Desse Fatrick
Residence of mother (if deceased so state) Munching, Su,	Residence of mother (if deceased so state) Drux, In.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana. County of HENDRICKS as: It depose and state the information given in this application is true and correct.	State of Indiana
County of HENDRICKS 98: in this application is true and correct.	County of
Signed James E Wiley	Signed Brenda & Smith
New Address Canterbury Dr. Donville, Fr 46132	New Address / Canterbury Drive
Sybscribed and sworn to before me this 19 day of Feb . 1981.	Subscribed and sworn to before me this 19 day of Fell 18/
Many Change of HENDRICKS	Mary Jone Russell Clerk HENDRICKS Circuit Court
Thomas June Masself Clerk Tierrena Circuit Court	The fact of the fa
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS }ss:	State of Indiana, HENDRICKS ss:
County of HENDRICKS	Father
Signed	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this
Clerk	Clerk
	- in license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS	and filed sure to the above named parties.
in County County	ourt by written order issued above named parties.
authorizes and directs the issuance of	TA MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen of Indiana dated the Alamonday of the state of Indiana dated the Alamonday of the state of the st	19. 81, authorizing the joining together as husband and wife
The state of the s	70
Be it further remembered, the following marriage certificate was filed in my o	ffice, to-wit:
Janes Janes	Country of Market
thousand nine hundred and	County State of
State of Indiana, Groom	County State of
State of Indiana, Groom Super Execution Solution and, Bride Solution Super Solution Solution of Solution Solution of Solution were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS HENDRICKS
were by me united in marriage as authorized by a marriage license issued for County.	that par poor
day of	Official Designation 1951.
	Official Designation 1951 Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	day of Russell Clerk Signed HENDRICKS Circuit Court
	Signoral Court

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THE REAL PROPERTY.	D	d	
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APPLICATION FOR MARRIAGE LICENSE

2-19-81 Date of Application

....Circuit Court

Form Prescribed By	FOR M	ARRIAGE LICENSE		402
Health under reaches	HENDRICKS	County	Dat	e of Application
of I.C. 31-1-3-2 Effective July 1, 1977	TIET TE TO		240	e of Application
		FEMALE Medical Examination Report Date	1 2	-12-81
MALE Medical Examination Report Dated 2-12-8				
Medical Examination Report Pared		Name of Physician		
Name of Physician Parks Answered LC. 31-1-3-6 prescribed "False state of the prescribed answered dollars (\$500.00)".	tement — Whoeve	or procures the issuance of a license to marry by	iny taise statemer	it, representation or pretens
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed shall be fined in any sum not exceeding five hundred dollars (\$500,00)".		FEMALE A	PPLICANT	
MALE APPLICANT		Name First	Middle	Last
Name First Middle But	der -	Date of Birth Month	Day	Year
Date of Birth Month Day Year		Place of Birth (State or foreign country)	10	53
Place of Birth (State or foreign country)		a support	Drd.	County State
Residence Address Street or R. R. City County	State	Residence Address 32 3 Street of R. R.	Pale	Gounty State
1215 Paymond St. Plfd.		Previous Marital Status: Never Married OR		,
Previous Marital Status: Never Married OR		Last Marriage Ended By: Death Divorce A	nnulment 🗆	
Last Marriage Ended By: Death Divorce Annulment D		Date of birth verified by: Birth Certificate	ludicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree		Down Other (Specify) Drivers		Dist.
A Other (Specify) Downs his w plat		Other (Specify) 1. Are you now or have you ever been adjudged to be	of unsound mind?	No No Yes
1 Are you now or have you ever been adjudged to be of unsound intition	Yes O	Are you now or have you ever been adjudged to be If answer is "yes", has the adjudication been remove	ved?	No□ Yes □
If answer is "yes", has the adjudication been removed:	Yes O	Are you afflicted with a transmissible disease?		No ♥ Yes C
2. Are you afflicted with a transmissible disease:	io Yes	3. Are you related to the male applicant closer than a	econd cousin?	No 🖾 Yes
3. Are you related to the female applicant closer than second cousin.	o A Yes □	4. Are you now under the influence of intoxicating lie		No A Yes
5. Are you now under the influence of a narcotic drug?	Yes D	5. Are you now under the influence of a narcotic dru	ζ?	No Yes
6. List the full names of any dependent children.		6. List the full names of any dependent children.		
retter of the floor				
Ruth Benjamin R. Butler				
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or orders to s	apport the above	у.П
dependent children?	o Yes	dependent children? If answer is "yes", it is required that this Application	on be accompanied by	No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof the	at you are in	compliance with any court order or orders issued		sacistación y proof that you are t
compliance with any court order or orders issued for their support. 8. Full name of father 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	*	8. Full name of father Stand		Creage
Residence of father (if deceased so state)			Chiesan	la Dulle
Birthplace of father (State or foreign country)		2	· Doi	
9. Full maiden name of mother Katherin Ellow and		Birthplace of father (State or foreign country)		
	a com	9. Full maiden name of mother	5 Dest	8
Residence of mother (if deceased so state) Layer, Ind.		Residence of mother (if deceased so state)	Com	
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country)	and -	
County of HENDRICKS State of Indiana, I depose and state the informa in this application is true an	ation given nd correct.	State of Indiana, County of HENDRICKS	I depose and	l state the information give lication is true and correct
11 11 2 2 1/1	7	County of	S	Q =
Signed Milliam 4. Bulle	1	Signed \		roman
New Address 1215 RAY MOWD ST	- L	New Address (215	Kaymon	of St. Plainfu
Subscribed and sworn to before me thisday ofday	1961.	Subscribed and sworn to before me this 19	day of	Beb. 1981
Mary Jane Russell Clerk HENDRICKS Cir	rcuit Court	Mary Jone Russell	Clerk HE	NDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN				
		CONSENT OF PARENTS, PARENT OR GUA	RDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only of		We, the parents, of this applicant hereby give	consent for this r	narriage. If only one paren
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, Country of HENDRICKS } ss:		State of Indiana,		
County of TILITADRICKS	-	County of HENDRICKS		
Signed	Father	Signed		T that
Signed	Mother	Signed	*******	Father
Subscribed and sworn to before me this	, 19	Subscrib-d I		Mothe
		Subscribed and sworn to before me this	day of	19
	Clerk		***************************************	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County	OF COURT.	A marriage license having l		
in County	Cour	A marriage license having been refused by written order issued a marriage license to the classical state of the cl	sed to the abo	ve named parties, the
			of my	and med
Be It Remembered there are Claim	E LICENSE	AND MARRIAGE GEORGE		
of Indiana dated the		tooded by the clerk of the	ENDRICKS	Cinnuit Cour
Destar J. Butter),	, 193\ authorizing the		Circuit Cour
Be it further remembered, the following marriage certificate was fil	led in my off	de dona de Octor	nning together	r as husbana and wy
Be it further remembered, the following marriage certificate was fill one thousand nine hundred and. State of Indiana, Groom.	he	rehy certify 1	W.V.	***************************************
State of Indiana Grown	at	In takes of the	day of	<i>p</i> ·
and, Bride Son & Ot	of	Hend Hel	, County of	Margan
State of Indiana, Groom State	of	Cou	nty, State of.	Ind
were by me united in marriage as authorized by a marriage license County. Dated this	issued for th	at purpose by the Cl	inty, State of	Sad
Dated this 20 day of Lb	104)	the Clerk of the Circuit Co	urt of	HENDRICKS
		· Ci		
Filed and recorded in accordance with the laws	01	Signed Softicial Designation	rafer	***************************************
Filed and recorded in accordance with the laws of the State of India	ana this	ficial Designation Paster		7 \
	S	signed Mary		, 19.81
		The state of the s	has all	
			HENDR	ICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

42

MALE Medical Examination Report Dated 1-26-81	FEMALE Date of Application
Name of Physician Carl L. Heinlein	Medical Examination Report Dated (-26-8)
Trains of the same	
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—When the fined in any sum not exceeding five hundred dallars (\$7.00) and False statement—When	Name of Physician Oal & Cumllin oever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	It is suance of a license to marry by any false statement, representation or pretense
Name First Middle	FEMALE APPLICANT
Date of Birth Manth Day Lessel	Name First Middle Last
10 10 10 10 10 10 10 10 10 10 10 10 10 1	Date of Birth Month Day
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	(Maliana)
Bot 23, line, Andreales, Indiana	252 Hine St. amo Sundayah County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	Other (Specify)
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin? No Yes □ 4. Are you now under the influence of intoxicating liquor? No ∇ Yes □
5. Are you now under the influence of a narcotic drug?	5 Are you now under the influence
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Sanga to 17 months	
	Sampa Jo 17 mouths
7. Are you required by any court order or orders to support the above	
dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father pames Price Passles	8. Full name of father Eddie Owell Cod
Residence of father (if deceased so state) My Molegna	Residence of father (if deceased so state) Amo Andrana
Birthplace of father (State or foreign country) Malania	In die
May Margaret Ata	Birthplace of father (State or foreign country)
9. Full maiden name of mother Many Manual Suff	9. Full maiden name of mother Mully and Willer
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Xame
Birthplace of mother (State or foreign country) Malana	Birthplace of mother (State or foreign country) Indiana
State of Indiana,	State of Indiana.
County of HENDRICKS ss: In this application is true and correct.	County of HENDRICKS ss: 1 depose and state the information given in this application is true and correct.
Signed X Lin Hesseles	Signed X Danny Cox
New Address 18 AMO In d	110 2 2 4
2 1.1 5.	20 41 8
Subscribed and sworn to before me this day of 190/.	Subscribed and sworn to before me this day of day of JUNIONICKS
Mary fane Keissell Clerk HENDRICKS Circuit Court	White Gerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS S8:
County of HENDRICKS ss:	County of
Signed Father	SignedFather
	SignedMother
Signed Mother	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of, 19	Clark
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	n A marriage license having been refused to the above named parties, the
HENDRICKS LICENSE ISSUED BY ORDER OF COURT	and filed art by written order issued 3 day varies
HENDRICKS County Lupition T Cou	art by written order issued and parties.
authorizes and directs the issuance of	a marriage license to the document
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Simothy C Heaster ar	rd
te it further remembered the following marriage certificate was filed in my of	ereby certify that on the 20 day of 500
Jam O Mouse	County of Hand
thousand nine hundred anda	County, State of
of Indiana, Groom	County, State of
nd, Bride of Indiana, Groom of of of the state of Indiana, Groom of of the state of Indiana, Groom of of the state of Indiana, Groom of Indian	hat murnose by the Clerk of the Circuit Court of HENDRICKS
ated this. 20	and John C. Warn
aay of	Signed
ounty. Outed this day of day of the State of Indiana this	Official Designation 1951
ued and recorded in accordance with the laws of the State of Indiana this	Clerk
the second secon	Signed HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County

Date of Application

Circuit Court

Medical Examination Report Dated_ FEMALE Medical Examination Report Dated Name of Physician_ Sandder ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense to the instance of a license to marry by any false statement, representation or pretense to the instance of a license to marry by any false statement, representation or pretense to the instance of a license to marry by any false statement. shall be fined in any sum not exceeding five hundred dollars (\$500,00) MALE APPLICANT mai Date of Birth 31 1944 Place of Birth (State Previous Marital Status: Never Married X OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce Annulment □ Date of birth verified by:

Birth Certificate

Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify) Ormus Other (Specify) Divers licen 1. Are you now or have you ever been adjudged to be of unsound mind No X Yes D No Yes 1. Are you now or have you ever been adjudged to be of unsound mind No Yes If answer is "yes", has the adjudication been removed No Tyes If answer is "yes", has the adjudication been removed? No Yes D 2. Are you afflicted with a transmissible disease No Yes 2. Are you afflicted with a transmissible disease? NoX Yes D 3. Are you related to the male applicant closer than second No Yes No XYes D Are you related to the female applicant closer than second cousin' 4. Are you now under the influence of intoxicating liquor No Yes Are you now under the influence of intoxicating liquor? No Yes D 5. Are you now under the influence of a narcotic drug? No Yes 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children List the full names of any dependent children. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No D Yes D dependent children No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support. 8. Full name of father Edward Thomas Residence of father (if deceased so state) Birthplace of father (State or foreign country) Residence of mother (if deceased so state) 403 1 Birthplace of mother (State or foreign country)_ Birthplace of mother (State or foreign country)_ State of Indiana, I depose and state the information given State of Indiana, I depose and state the information given County of ... Signed Maribeth Malphall New Address 713 Fromward Dr., Plainfield New Address 713 IRONWOOD PR 90 Subscribed and sworn to before me this 20 day of Russell ark HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary..... State of Indiana, HENDRICKS State of Indiana, County of. HENDRICKS County of Signed. Signed. Subscribed and sworn to before me this Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the 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 of Indiana dated the day of Jeb, Houtton, 19 St., authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Deddy Eugene Durner hereby certify that on the 28 State of Indiana, Groom Hand and, Bride Marshall Marshall of Hend 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 Filed and recorded in accordance with the laws of the State of Indiana this.... Official Designation.....

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

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ile_		

County MALE Date of Application Medical Examination Report Dated_ 2-19-81 FEMALE Medical Examination Report Dated 2-19 Name of Physician Thomas H ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense MALE APPLICANT FEMALE APPLICANT Date of Birth V Previous Marital Status: Never Married X OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce X Annulment D Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree * Other (Specify) Quinun UCo & Other (Specify) Drivers (icen 1. Are you now or have you ever been adjudged to be of unsound mind! 1. Are you now or have you ever been adjudged to be of unsound mind No Yes O If answer is "yes", has the adjudication been removed? No Tyes If answer is "yes", has the adjudication been removed No T Yes No Yes 2. Are you afflicted with a transmissible disease. No Yes Are you related to the female applicant closer than second cousin? No Yes 3. Are you related to the male applicant closer than second cousin No Yes 🗆 No Yes 4. Are you now under the influence of intoxicating liquor? No X Yes D 5 Are you now under the influence of a narcotic drug? 5. Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children. 6. List the full names of any dependent children Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children No Yes D If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Ruynold Birthplace of mother (State or foreign country)___ Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana, New Address P.O. Box 194 Pettelianer Subscribed and sworn to before me this 33 day of Jely 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of ... County of ... Signed Mother Subscribed and sworn to before me this. Subscribed and sworn to before me this ... 19...... Clerk 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...... HENDRICKS ..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., authorizing the joining together as husband and wife of Indiana dated the... and Kasen ann Shon Sten Be it further remembered, the following marriage certificate was filed in my office, to-wit: one thousand nine hundred and S. molde of Hend County, State of State of Indiana, Groom James affect I In Thompson? Dated this.

Official Designation.....

Circuit Court

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

2-23-81 Date of Application

... Circuit Court

MALE 2 19-81	FEMALE Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician
Name of Physician U'. VI AU (UV)	pever procures the issuance of a license to marry by any false statement, representation or preter
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement — 5 nd shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Mirsty Middle \ Last
Name First Middle Sabo, J.	Date of Birth Month Day (Manone)
Date of Birth Month Day Year	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	mariera
Residence Address Street or R. R. City County State.	Residence Address Ookhust #54 Prownshing Indian State
Oakhust#5, Drownsloung, Windrichs, Milliam	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by:	# 1857
Other (Specify) Was like the of unsound mind Not Yes	Other (Specify) Are you now or have you ever been adjudged to be of unsound mind? No Yes Yes
Are you now or have you ever been adjudged to be of discount mine.	If answer is "yes", has the adjudication been removed No Yes
If answer is "yes", has the adjudication been removed? No Yes Yes	2. Are you afflicted with a transmissible disease" Not Yes
Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin No Yes
. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No. Yes
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? Note: Yes 6. List the full names of any dependent children.
List the full names of any dependent children.	b. List the full names of any dependent
ason with	
Jeff bouglas le ys.	
Are you required by any court order or orders to support the above dependent children? No Pes P	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders is sued for their support.	compliance with any court order or orders issued for their apport.
Full name of father XIIII U'- X2000 M.	8. Full name of father dister Von Commons
Residence of father (if deceased so state) Pround buy Maliana	Residence of father (if deceased so state) Vittabore, Malia
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) North Carolina
Full maiden name of mother alzaluth Vergica	9. Full maiden name of mother Elegabeth Course Classon
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Quine
Birthplace of mother (State or foreign country)	1 led
	Birthplace of mother (State or foreign country) State of Indiana,
ate of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.	County of HENDRICKS Bas: I depose and state the information gives in this application is true and corre
Signed Signed	Signed & Pebuca S. Anxnor
New Address DAKHOVST #5 Brownsburg	New Address Oakkurst #5 Browna
abscribed and sworn to before me this 23 day of 416.	Subscribed and sworn to before me this 23 day of Alb 195
Mary Jane Russell Clerk HENDRICKS Circuit Court	
Oreut Court	Mary Jane Mussell Glerk HENDRICKS Circuit Con
DNSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
e, 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 pare
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	the consent of the other parent unnecessary
ate of Indiana,	
unty of HENDRICKS ss:	State of Indiana, County of HENDRICKS
SignedFather	County of HENDRICKS
Signed Mother	SignedFat
Oscribed and sworn to before me this	Signed Mot
	Subscribed and sworn to before me thisday of19
Clerk	
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	
HENDRICKS County Co authorizes and directs the issuance of	T. A marriage license having been refused to the above named parties, to
authorizes and directs the issuance of RETURN OF MARRIAGE LIGHT	of a married by written order issued and fi
PETUDN OF ACT	to the above named parties.
Be It Remembered, there was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE
Indiana dated the day of Felo	ise issued by the clerk of the HENDRICKS Circuit Common authorizing the joining together as husband and unfice, to-wit:
it further remembered the following	authorizing the joining together as husband and u
The tit my o	ince, to-wit.
e thousand nine hundred and S	hereby certify that on the 28 day of 30
ate of Indiana, Groom house Shallo	hereby certify that on the 28 day of 300 of Mand
a, Bride Salvera S Dagnals)	nereby certify that on the 28 day of
ate of Indiana, Groom	that purpose by the Clerk of the Circuit Court of HENDRICKS
nunty. ated this day of day of 3, 1981	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	
led and recorded in	Official Designation
led and recorded in accordance with the laws of the State of Indiana this	Official Designation
Mallatores Experies	Similar March 1081
	Company of the Market of the Company
	HENDRICKS Circuit Con
	Larcult Con

..Clerk

... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

No._____

	County
MALE	Date of Application
Medical Examination Report Dated 4/3/8/	FEMALE Medical Formation 9/12/81
Name of Physician Rallers a. The Mangal	Medical Examination Report Dated 2/13/8/
- give	Name of Physician Kalust a. The Raugal
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	aver the second of the second
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	
Name First Middle Mast Last	Name First Middle
Date of Birth Month Day Year	- Hoall Float
March 31 1051	Date of Birth 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	hold it is to have
Bix 89 Kincheller State	Residence Address Street of R. R. City County State
Previous Marital Status: Never Married OR	- 114 M. Vine Sh. Harrhild So.
Previous Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
	Last Marriage Ended By: Death □ Divorce □ Annulment □
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
drive has I bat	distributed - Judicial Decree
Other (Specify) Wille Michael Gelline)	Other (Specify) drums lience bectine
1. Are you now or have you ever been adjudged to be of unsound mind?	()
If answer is "yes", has the adjudication been removed?	
2. Are you afflicted with a transmissible disease?	
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? Note: Yes :	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
, but the last the same of the	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
3. Full name of father Clo Pale Charles	8. Full name of father februard fallisten
Residence of father (if deceased so state) Robotalille In	halle week.
residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Indiana	Birthplace of father (State or foreign country)
Full maiden name of mother Allms Marie Chung	9. Full maiden name of mother Mora Gentruste Cognier
Turmaturn name of modifice California of the Cal	9. Full maiden name of mother flock flowings Communications
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) All suffalice 32
Birthplace of mother (State or foreign country) Senticely	F. tusky
	Birthplace of mother (State or foreign country)
HENDRICKS	State of Indiana, HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
County of TIENDRICKS In this application is true and correct.	County of A
Signed Slephent Chastain	Signed Haggy L. Clubles
New Address Box 89, Rose base, IN, 46177	New Address Bby #89 Raachdale SIN 46172
	New Address December 1
Subscribed and sworn to before me this 24 day of 198.	Subscribed and sworn to before me this 24 day of 19
many the Sussell Clerk HENDRICKS Circuit Court	MARY Jane Gusself Clerk HENDRICKS Circuit Court
CHEST CHEST CHEST COURT	Many J
	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 parent	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	signs, state facts which render the consent of the other parent unnecessary
the consent of the consent of the other parent uniteressary	
State of Indiana,	State of Indiana, HENDRICKS ss:
County of HENDRICKS ss:	County of
	Signed Father
Signed	
Signed Mother	Signed
	Subscribed and sworn to before me thisday of19
Subscribed and sworn to before me this	Subscribed and sworth Clerk
Clerk	
	licers having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been related to the and fled
HENDRICKS	ourt by written order issued
n and directs the issuance of	of a marriage license to the above named parties.
authorizes and directs the issuance	AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENS	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 28th day of	se issued by the southerizing the joining together as husband and wife
of Indiana dated the 28th day of Fel.	, 199 , authorities the forms
	nu
Be it further remembered, the following marriage certificate was filed in my o	ffice, to-writ:
Tons MCH. Do. and	hereby certify that on the day of day of County of Hereby,
me thousand nine hundred and	at 5.30 County of
ne mousand nine hundred and	of County, State of
State of Indiana, Groom Stephen R. Chastain	County, State of
ind, Bride League Oction of	HENDRICKS
vere by magniful:	that parper
Sounty.	T won is
Pated this 26 day of May, 1981	Signed Tom Mc Kelleard Official Designation Minutes
aay of	steer M with
	Official Designation

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

APPLICATION FOR MARRIAGE LICENSE

1 16- 24 1981 Date of Application

Form Prescribed By	TATION FOR M	ARRIAGE LICENSE	1 1h 94 19 P1
Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of Application
		FEMALE Medical Examination Report Date	ed_2-24-8/
MALE 2-24-	8/	91 16:11	4 a. Me day of has
MALE Medical Examination Report Dated 2-24-	1 ml.	Name of Physician / Hyur	the state of the
Name of Physician Kallett a.M. Wall Ad	Whoov	er procures the issuance of a license to marry by	any false statement, representation or pretense
Name of Physician Raly A. M. Vau 44. ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribe ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribe and the fixed in any sum not exceeding five hundred dollars (\$500.0)	d "False statement — who to	FEMALE A	APPLICANT
ALL QUESTIONS MUST BE ANSWERED. IC. 31 shall be fined in any sum not exceeding five hundred dollars (\$500.0) MALE APPLICANT		First	Middle Last
Name First Middle	Last	Name Tukke Month	Day Year Year
Topald Lee Cla	Year	Date of Birth	15 1960
July 2	96/	Place of Birth (State or foreign country)	monral of
Place of Birth (State or foreign country)	unty State	Residence Address Street or R. R.	City County State
Residence Address Street or R. R. City Co	<u> </u>	(a) Do Suite BOR	7770
Previous Marital Status: Never Married OR-		Previous Marital Status: Never Married GOR Last Marriage Ended By: Death Divorce GO	Annulment 🗆
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by: Birth Certificate	Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree		A	line (hitu)
Louise Prima	viture)	Other (Specify) Cillurs	be of unsound mind? No Yes D
1. Are you now or have you ever been adjudged to be of unsound mind?	No 🖸 Yes 🗆	1. Are you now or have you ever been adjudged to b	oved? No Pres D
If answer is "yes", has the adjudication been removed?	No Yes 🗆	If answer is "yes", has the adjudication been rem 2. Are you afflicted with a transmissible disease?	No D Yes D
2. Are you afflicted with a transmissible disease?	No Yes O	Are you related to the male applicant closer than	second cousin? Now Yes
3. Are you related to the female applicant closer than second cousin?	No Yes	4. Are you now under the influence of intoxicating	liquor? No Tes 🗆
4. Are you now under the influence of intoxicating liquor?	No Yes □	5. Are you now under the influence of a narcotic dr	
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.		6. List the full names of any dependent children.	
o. Dist the fall limited of they dependent			
			the state of the s
The state of the s		7. Are you required by any court order or orders to	support the above
Are you required by any court order or orders to support the above dependent children?	No □ Yes □	dependent children?	No 2 Tes 2
If answer is "yes", it is required that this Application be accompanied by satisf	actory proof that you are in	If answer is "yes", it is required that this Applica compliance with any court order or orders issued	tion be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.		8. Full name of father Addition	Begins Freeman
8. Full name of father Affel A. Class	Qu.	4	und Salin In.
Residence of father (if deceased so state)	- OH -	Residence of father (if deceased so state)	believe
Birthplace of father (State or foreign country)	you to	Birthplace of father (State or foreign country)	The Met his well
9. Full maiden name of mother Aux Translation	1/1= sease	9. Full maiden name of mother / MUNI	may cerumina
Residence of mother (if deceased so state)	1 299.	Residence of mother (if deceased so state)	With Salem, In !
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country)	Gellen
HENDRICKS Ses in this application	e the information given	State of Indiana, HENDRICKS	ss: I depose and state the information given in this application is true and correct.
County of	1 b	County of TILINDRICKS	S 1
Signed mall the	O.	Signed	De J. Treeman
New Address Old & Deck	Inue, Indi	New Address 6128	
	freday 1981	Subscribed and sworn to before me this	24 day of February, 19
Affilial Marill Clerk HENDR	RICKS Circuit Court	May pour Bussell	Clerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN			
		CONSENT OF PARENTS, PARENT OR GU	
We, the parents, of this applicant hereby give consent for this marris signs, state facts which render the consent of the other parent unner		We, the parents, of this applicant hereby give	ve consent for this marriage. If only one parent
signs, state facts which render the consent of the other parent unnec	cessary	signs, state facts which render the consent of	of the other parent unnecessary
State of Indiana, County of HENDRICKS } ss:		State of Indiana,	
County of TIETUDICIO		County of HENDRICKS	88:
Signed	Father	Signed	Father
	Mother		Mother
Subscribed and sworn to before me this	, 19		day of, 19
	Clerk	so service me this	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY	OPPER 05		***************************************
COMPLETE IF MARRIAGE LICENSE ISSUED BY HENDRICKS County	ORDER OF COURT	T. A marriage license having been re-	fused to the above named parties, the
in authorizes and	directs the issue	urt by written order issued.	and filed
RETURN OF	MARRA THE ISSUANCE OF	f a marriage license to the above named	d parties.
of Indiana dated the day of day of	office a marriage licen	E AND MARRIAGE CERTIFICATE	
of Indiana dated the day of day of Be it further remembered, the following marriage certifications.	Feb.	se issued by the clerk of the	HENDRICKS Circuit Court
Be it further remembered, the following	icate and Cl. 1	authorizing the	joining together as husband and wife
Be it further remembered, the following marriage certifi	cate was filed in my o	ffice, to-wit:	Doeward
one thousand nine hundred and State of Indiana, Groom		hereby certify that on the	1 1-
one thousand nine hundred and State of Indiana, Groom	C Stank	at him	County of Hand
The second secon			The state of the s
County County	age license issued for		County, State of Sind
were by me united in marriage as authorized by a marriage as a marriage	issued for t	that purpose by the Clerk of the Circuit	Court of HENDRICKS
cutoff of the	, 19		
Filed and		Signed fany	Jelly .
Filed and recorded in accordance with the laws of the St	ate of Indiana this	= orgitation.	
		0 1 11 11 11 11 11	. 19.
		I such the way	Clerk Clerk
			HENDRICKS Circuit Court

Indiana State Board of APPLICATION TOP	FINDIANA No73
Health under Authority of I.C. 31-1-3-2 of I.C. 31-1-3-2	MARRIAGE LICENSE
Effective July 1, 1977	CKS Country Co
	Date of Application
MALE Medical Examination Report Dated 2-6-81	FEMALE
Name of Physician Sieira	Medical Examination Report Dated 2-24-81 Name of Physician Xeelin
ALL QUESTIONS MUST BE ANSWERED, L.C. 31-1-3-6 prescribed "False statement—Wh shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	neever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	
Name First Middle Last	Name First Middle
Date of Birth Month Day Year	Sext Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Dudiana	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 OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drevers gis w/ pid.	
1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes	A Other (Specify) Drusso & in up peat.
If answer is "yes", has the adjudication been removed? No□ Yes□	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes I
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No 🖔 Yes	2 American
4. Are you now under the influence of intoxicating liquor? No Yes	4. Are you now under the influence of intoxicating liquor? No □ Yes □ No □ Yes □
5. Are you now under the influence of a narcotic drug? No W Yes	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
N Children Color	Kara Dleyander
 Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐ 	7. Are you required by any court order or orders to support the above dependent children? No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Eddie Olden Myses	8. Full name of father James & Molicost
Residence of father (if deceased so state) a willow had	Residence of father (if deceased so state) Danisle Del,
Birthplace of father (State or foreign country)	
9. Full maiden name of mother Wildeld & Walls	Birthplace of father (State or foreign country)
0 .0.00	9. Full maiden name of mother Seature 9. Seaguer
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.
2	County of
Signed Yelly h Mylo	Signed Aland Maller Maller
New Address RRZ BOX 182	New Address RR2 DOX 182 Nunuelle
Subscribed and sworn to before me this 24 day of Sub 1981	Subscribed and sworn to before me this 26 day of Sale , 1981
May fare Russell Clerk HENDRICKS Circuit Court	Mary Jone Russell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS ss:
County of HENDRICKS ss:	County of
Signed Father	Signed

Subscribed and sworn to before me this day of	Subscribed and sworn to before me this day of Cler
HENDRICKS County	OURT. A marriage license having been refused to the above named parties, the Court by written order issued
in authorizes and directs the issuan	ice of a marriage license to the above hamed parties.
Be It Remembered, there was filed in my office a marriage	CINSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Cour License issued by the clerk of the , 190, authorizing the joining together as husband and wife

Subscribed and sworn to before me this...

Mother

the the most ed, there was filed in my object of	Y is the joining together as husband and wife
of Indiana dated the 2 day of TITAL	, 196 authorizing the joining together as husband and wife
	and Jews of Wellings
Be it further remembered, the following marriage certificate was filed in r	my office, to-wil.
1, Stanley a. Johnson	hereby certify that on the day of County of County of
one thousand nine hundred and	at County, State of Och
State of Indiana, Groom Sarry Myss	of County, State of Ord
and Die	LIFKIDDICVE
were have a linear jected	for 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. Dated this ..

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

Signed..

Official Designation...

Circuit Court

Mother

Form Prescribed By Indiana State Board of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

.Circuit Court

Health under Authority of I.C. 31-1-3-2 Date of Application Effective July 1, 1977 Medical Examination Report Dated 216 86, 1981 MALE Medical Examination Report Dated Ask Name of Physician_ Soudder ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or procures the issuance of a license to marry by any false statement, representation or procures the issuance of a license to marry by any false statement, representation or procures the issuance of a license to marry by any false statement, representation or procures the issuance of a license to marry by any false statement, representation or procures the issuance of a license to marry by any false statement. MALE APPLICANT Name First Date of Birth Date of Birth Place of Birth (State or Place of Birth (State of foreign country) Previous Marital Status. Never Married D OR Last Marriage Ended By Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree Laurens 1. Are you now or have you ever been adjudged to be of u No Yes 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed No U Yes U If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease No Ves 2. Are you afflicted with a transmissible disease? 3. Are you related to the male applicant closer than second cousin' No Yes 3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug No Yes 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above dependent children' No Yes D No No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in 8. Full name of father Acros Residence of father (if deceased so state) Residence of father (if deceased so state) Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Sownslaw Birthplace of mother (State or foreign country) Indlove Birthplace of mother (State or foreign country). State of Indiana, I depose and state the information given in this application is true and correct. State of Indiana, HENDRICKS Brownsmuns 46112 Subscribed and sworn to before me this. Subscribed and sworn to before me this HENDRICKS Circuit Court Clerk HENDRICKS 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 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... signs, state facts which render the consent of the other parent unnecessary **HENDRICKS** State of Indiana, County of .. HENDRICKS County of Signed Signed. Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the 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 18 day of March of Indiana dated the. HENDRICKS Be it further remembered, the following marriage certificate was filed in my office, to-wit:, 19.8/..., authorizing the joining together as husband and wife 1, John C. Mower hereby certify that on the 25 day of March one thousand nine hundred and. State of Indiana, Groom Peter M. Sharp and, Bride Reverly J. Fried were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court ofCounty, State ofCounty, State of Signed. Filed and recorded in accordance with the laws of the State of Indiana this..... Official Designation.

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

HENDRICKS

... Circuit Court

MALE	County 2-27-81
MALE Medical Examination Report Dated 2-24-f/ Name of Physician Thomas Moretto, M.D.	FEMALE Date of Application
Name of Physician Thomas Moretto po D	Medical Examination Report Dated 2-24-81
Maint of the Anguige DE Anguige D	
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry be any followed.
Name Pirst Middle Last 1	Name First First
Date of Birth Month Day Year	Date of Birth Date of Birth
Place of Birth (State or foreign country)	Place of Binsh (S.)
Residence Address, Street or B.R. City County State	Place of Birth (State or foreign country) Ornwall 1947
1726 W. Monis St. marin, on.	Residence Address Street or R R City County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
* Other (Specify) Arivers die. w/picture	A Other (Specify) Orineis die. mul priting
1. Are you now or have you ever been adjudged to be of unsound mind? Yes If answer is "yes", has the adjudication been removed?	1 Amount
No Yes U	If answer is "yes", has the adjudication been removed?
2. Are you related to the female applicant closer than second cousin? Not Yes Yes Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Example 1.
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	Charles
	Christine
	angela
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Jack by Robbins Sr.	compliance with any court order or orders issued for their support. 8. Full name of father Walter De Custer
Residence of father (if deceased so state) Stellnwood, Tw.	Residence of father (if deceased so state) De Graff, Oliv
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) W. Va.
9. Full maiden name of mother Viola, J. Khordes	9. Full maiden name of mother Dolores a. Ropes
Residence of mother (if deceased so state) Relenwood	01.11
Birthplace of mother (State or foreign country)	Residence of mother (if deceased so state) Okolency, Wig.
State of Indiana	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.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed Jack a Rolling Ch	Signed Frances O. Schnitt
New Address 82726 W. Morris St. Indols	New Address 8726West Marris St.
Subscribed and sworn to before me this 27 day of Full 1987	Subscribed and sworn to before me this 27 day of Jeh. , 1981.
Mary Jane Phusself Clerk HENDRICKS Circuit Court	man la HENDRICKE
Circuit Court	Many fane Kusself Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
state of Indiana,	State of Indiana
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS State of Indiana, HENDRICKS
Signed. Father	Signed. Father
A CUICI	Mother
Signed Mother	Subscribed and sworn to before me this
ubscribed and sworn to before me this day of 19 19	Subscribed and sworn to before me this
Clerk	OFF.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	. A marriage license having been refused to the above named parties, the
HENDRICKS County Cour	rt by written order issued
authorizes and directs the issuance of	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
The At 20 amountained the Classic Control of the manifest linearing the control of the control o	issued by the clerk of the
Indiana dated the Ind day of March	1. Description of the solution
e it further remembered, the following marriage certificate was filed in my office	ce, to-wit:
	and that on the and of the
at thousand nine hundred and at. ate of Indiana, Groom of.	
ate of Indiana	To low County, State of
d P	County State of Und
ere by me united in a line of the	at purpose by the Clerk of the Circuit Court of HENDRICKS
ere by me united in marriage as authorized by a marriage license issued for the bunty.	at purpose by the Clerk of the Circuit Court of HENDRICKS
ere by me united in marriage as authorized by a marriage license issued for the punty. ated this	Signed Signed House
ere by me united in marriage as authorized by a marriage license issued for the ounty. ated this day of Off	Signed Signed Hosley

APPLICATION FOR MARRIAGE LICENSE

3-2-8/ Date of Application

HENDRICKS

....Circuit Court

	MARRIAGE LICENSE KS County File 3-2-8/ Date of Application
f I.C. 31-1-3-2 Effective July 1, 1977	Date of Application
	FEMALE Medical Examination Report Dated 2/18/8/
MALE Medical Examination Report Dated 2-17-8/	1 2 78/18
	Name of Physician
Name of Physician Who	oever procures the issuance of a license to marry by any false statement, representation or pre
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "Faise statement hall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	First Middle & bast
ame First, Middle Clast	Name Day Year
Year ,	Date of Birth 25 196/
13 1954	Place of Birth (State or fore) on country)
almoule Lancaster California (Sounty State)	Residence Address Street of R. R. B. City County / State
esidence Address Street of R. R. & Burg Kerel Suc.	209 Ellain Dung Hend - One
	Previous Marital Status: Never Married OR
revious Marital Status: Never Married OR ast Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
ate of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Or find afairture	Other(Specify)
Other (Specify) Other Specify State of the of meaning mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No
Are you now or have you ever been adjudged to be of this order in this.	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed? Are you afflicted with a transmissible disease? No U Yes	2. Are you afflicted with a transmissible disease? No
Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin No 6
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor?
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug. No.
List the full names of any dependent children.	6. List the full names of any dependent children
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you
compliance with any court order or orders, issued for their support. Full name of father Duology Kay Europe	compliance with any court order or orders issued for their support.
Al Parlambia & A	Soulat alast
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Blooming to Sho
Full maiden name of mother Stephanie Unn Brean	9. Full maiden name of mother Betty Joan Starks
Residence of mother (if deceased so state) Suelph Ind.	Residence of mother (if deceased so state) Suegolo Sae.
Birthplace of mother (State or foreign country) California	Birthplace of mother (State or foreign country) Incliana
tate of Indiana,	State of Indiana, I depose and state the information
ounty of HENDRICKS ss: I depose and state the information given in this policiation is true and correct.	County of HENDRICKS
Signed Muchan Coans	to 3 Brance X Xxxxx
New Address 209 Employ 8	New Address 209 6 Drave
ubscribed and sworn to before me this. and day of March 198/	2 Maral
Mary Jane Systella, HENDRICKS	Man 1 Q 11
Circuit Court	Trany Jane Busself Clerk HENDRICKS Circuit
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF DARROUSE DARROUSE
e, the parents, of this applicant hereby give consent for this marriage. If only one parent	CONSENT OF PARENTS, PARENT OR GUARDIAN
gns, 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
the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
ate of Indiana,	State of Indiana
ounty of HENDRICKS ss:	State of Indiana, County of HENDRICKS } ss:
Signed	
Signed Mother	Signed
bscribed and sworn to before me this day of 19	Signed
	Subscribed and sworn to before me this day of , 1
Clerk	
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF THE	
HENDRICKS County	RT. A marriage license having been refused to the above named parties
authorizes and directs the issue	ourt by written order issued
DETILIDAL OF THE	marriage license to the above named parties.
The At Remembered 44	SE AND MARRIAGE
Indiana dated the	HENDRICKS
The Evano	, 19. , guthorizing the joining together as hysbard and
Rev. Dome of the following marriage certificate was filed in my	office to-wit
e thousand nine hundred and T	hereby certify that
100	day of Tack
ed Bride Jen & Catal	of Second Country of 1 augo
ere by me united in marriage of	Hend County, State of Isal
nunty. ated this day of Mark 1981	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 195	******
	Name of 1
the laws of the State of Indiana this	Official Designation Signed day of Seal 1981
Market State of Control of Contro	day of Man (1)

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

Circuit Court

	County
MALE Medical Examination Report Dated 2-12-81	FEMALE Date of Application
0 00 0 11	Medical Examination Report Dated 2-17-81
Name of Physician G. M. Gullickson	New (1) (2) 111
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement, West	Marie of Physician J. Wieroema
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	pever procures the issuance of a license to marry by any false statement, representation or pretense
Name First, Mighle	FEMALE APPLICANT
Smothy 4. Reported	Name Ffret Middle
Date of Birth Month Pay Year	Date of Birth Month To Kunter
Place of Birth (State or foreign country)	Place of Birth (State or fofeign country)
Residence Address Street of R. R. City County State	Variate 11-
The Heinley Charlestour Gava Charleston Charleston S.	M Residence Address Street - P. P.
Previous Marital Status: Never Married OR	med. Should here. Incl.
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Author & Poury, In	Judicial Decree
	Other (Specify) Drivers Sicense Upirtus
No Tes 3	1. Are you now or have you ever been adjudged to be of unsound mind? No B Yes D
If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes	If answer is "yes", has the adjudication been removed?
2. Are you related to the female applicant closer the second by	2. Are you afflicted with a transmissible disease? No Yes O
4. Are you now under the influence of intoxicating liquor? No Ves	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor?
, 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.
	Staci & Hunter
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Joseph Ul. Receiveur	compliance with any court-order or orders issued for their support. 8. Full name of father Trank.
Residence of father (if deceased so state) Inelple Inel.	1
	Residence of father (if deceased so state) Green Castle Suc.
Shaplace of latter (blace of foreign country)	Birthplace of father (State or foreign country) Snelpls Ind.
9. Full maiden name of mother and Supley	9. Full maiden name of mother Bonnu Jo Milender
Residence of mother (if deceased so state) Include Inc	Residence of mother (if deceased so state) Ereen aastle Ino).
Birthplace of mother (State or foreign country) Stalpls Ind	
State of Indiana, I depose and state the information given	Birthplace of mother (State or foreign country) State of Indiana,
County of HENDRICKS Sas: In this application is true and correct.	County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
Signed I work of Received	Donna & Ideato
	Signed A A Q O
New Address Charleston SC 1	New Address Charleston 3.C
Subscribed and sworn to before me this day of // Orch 198/	Subscribed and sworn to before me this day of March 187.
That Jane Bussell Clerk HENDRICKS Circuit Court	Mary Jane Bussell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana,
County of HENDRICKS ss:	County of HENDRICKS
SignedFather	Signed Father
	Signed
Signed Mother	
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of19
Clerk	Clerk
COMPLETE AT A	n to live having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS	I. A marriage license naving been refused to the above hand parties, the
in County County County	art by written order issued
authorizes and directs the issuance of	
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
The At Damandana Hanna Cladin we Fra a marriage licens	re issued by the clerk of the
of Indiana dated the The day of I fack	19.0/, authorizing the joining together as husband and wife
Be it with	id Downs p
Be it further remembered, the following marriage certificate was filed in my of I, h	day of March
one thousand nine hundred and State of Latin	(County, State of
were by me united in marriage as authorized by a marriage license issued for the County.	hat suppose by the Clerk of the Circuit Court of HENDRICKS
County.	nat purpose by the country
Dated this day of March, 1981	
	ficial Designation March 19 81.
Filed and recorded in accordance with the laws of the State of Indiana this	10 day of March Russell Clerk

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

__County

3-2-81 Date of Application

... Circuit Court

HENDRICKS

MALE	FEMALE Medical Examination Report Dated	
MALE Medical Examination Report Dated 2-18-81	Name of Physician	
Name of Physician Section	Name of Physician	
Name of Physician.	t-Whoever procures the issuance of a hoense to marry by any false statement, representation or pretent	
ALL QUESTIONS MUST BE ANSWERED. IC. 31 Double (\$500,00)". shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT	
MALE APPLICANT	Name Springt Middle Those	
Name First Middle	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)	GIA:	
Sucagnes and County State	Residence Address Street or R. R. City Squarty State	
Residence Address Street or R. R. City County	2 - 113 St. Schul Markett Spire Ste	
OTO: VORONOS	Previous Marital Status Never Married OR	
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Last Marriage Ended By	
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree	
Date of officer extractions of the contract of	Other (Specify)	
Other (Specify)	N. P.	
1. Are you now or have you ever been adjudged to be of unsound mind? No □ Y	41 D ==	
If answer is "yes", has the adjudication been removed?	N. D.	
Z. Are you afflicted with a transmissible disease.	N. P. v.	
3. Are you related to the female applicant closer than second cousin.	N. P. a.	
4. Are you now under the influence of intoxicating fiquor:	m/	
5. Are you now under the influence of a narcotic drug.	6. List the full names of any dependent children	
6. List the full names of any dependent children.		
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above	
dependent children?	es — dependent comment	
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you a	are in If answer is "yes", it is required that this Application be accompliance by satisfactory proof that you at compliance with any court orders issued for their support.	
compliance with any court order or orders issued for their support. 8. Full name of father way were the support of the suppor	8. Full name of father hourt Villa	
Full name of rather	2 0	
2	Residence of father (if deceased so state)	
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)	
authow. Hallmaiden name of mother Manilya K. Walter	9. Full maiden name of mother Il ary Jy Spencer	
Residence of mother (if deceased so state)	1 Vanne	
	Residence of mother (if deceased so state)	
Birthplace of mother (State or foreign country) X MOX CO. Und.	Birthplace of mother (State or foreign country)	
State of Indiana, County of HENDRICKS Sas: I depose and state the information g in this application is true and com-	State of Indiana, rect. County of HENDRICKS as: I depose and state the information gi in this application is true and core	
Signed L. Leffuy. H. Jan Sul New Address. Clover luaf app. 304 Subscribed and sworn to before me this. 2 day of Month 195 Manual Clerk HENDRICKS. Circuit C	Subscribed and sworn to before me this 3 day of May 192	
CONSENT OF PARENTS, PARENT OR GUARDIAN		
We, the parents, of this applicant hereby give consent for this marriage. If only one pa	CONSENT OF PARENTS, PARENT OR GUARDIAN	
	of the parents, of this applicant hereby give consent for this marriage. If only one parents	
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,		
County of HENDRICKS ss:	State of Indiana,	
21 1/2	County of HENDRICKS	
Vm :/ 20	Signed 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Signed Marilyn T. Van hul Mo		
Subscribed and sworn to before me this and ay of March	Signed 11 Carty D Day Mot	
Mary Jane Russell	Subscribed and sworn to before me this day of 19	
DENDRICKS LICENSE ISSUED BY ORDER OF	COURT. A marriage license having been refused to the above named parties,	
HENDRICKS County authorizes and directs the	Court by written and it was a series of the control of the shore named parties,	
authorizes and directs the issu	and for a marriage live and fo	
RETURN OF MARRIAGE	and of a marriage license to the above named parties.	
Be It Remembered there are Chili	CENSE AND MARRIAGE CERTIFICATION OF THE CONTROL OF	
of Indiana dated the	tooked by the clerk of the	
Re it turber donor had the	and and authorizing the joining together as husband and un my office, to-wit?	
Barrent 1111000	m my office, to-wit	
me thousand nine but I is Si	hereby contit	
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ord Pride W Pride War Pride Pr	at Just County of County State of	
was by state () () ()	County State of	
County.	County of County of County, State of County, State of HENDRICKS	
County. Dated this day of Our local	ed for that purpose by the Clerk of the Circuit Court of HENDRICKS	
auy of the second	- V Constituted	
	a: D	
'lled and recorded in accordance with the laws of the State of I	Official Designation this day of Signed	
Indiana t	this 23	
	day of	

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

HENDRICKS

Clerk

Circuit Court

MALE	Date of Application
Medical Examination Report Dated 2-26-81	FEMALE
Name of Physician Quality	Medical Examination Report Dated 2-28-81
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed *Falson	Name of Physician Realization or pretense to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	oever procures the issuance of a license to marry by any false statement, representation or party
Dasser Seam & last	Name First
Date of Birth Month Day Year	Date of Birth Month
Place of Birth (State or foreign equatry)	Qay Year
Residence Address Street or R. R. City Control	Place of Birth (State or foreign country)
5013 January D. County State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	349 Sadd Rd. PSLL County State
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) D. J. W/ Pist - Reg. 150to	Other (Specify) D. & w/ Diet, of Birth Contilinate
1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes	1 1 and the state of the state
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? No Yes O
2. Are you afflicted with a transmissible disease? No V Yes D	2 Are you offlicted with
3. Are you related to the female applicant closer than second cousin? No P Yes	3. Are you related to the male
4. Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor? No ♥ Yes □
Are you now under the influence of a narcotic drug? No Yes No Yes	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
	THE RESERVE OF THE PARTY OF THE
7. Are you required by any court order or orders to support the above	
dependent children? No 🗆 Yes 🗆	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father 2000 9 20 3 - 2000 9 20 20	compliance with any court order or orders issued for their support.
	8. Full name of father Robert & Albania
Residence of father (if deceased so state Rt 18 of 373 Clayton, Il	Residence of father (if deceased so state) POLL Quel.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Mary Q. Water	
alea Oa	9. Full maiden name of mother Season M. Orolough
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed Janen modgrass	Signed Sally Idaria New Address 725 Sunort In
New Address 725 Sunset Dr	New Address 725 Sunot Dr
Subscribed and sworn to before me this 2 day of Manne 1981.	Subscribed and sworn to before me this day of
Massifer 3 marsh HENDRICKS	Mary Jane Russell Clerk HENDRICKS Circuit Court
Clerk Circuit Court	Clerk 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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana	State of Indiana
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
Signed Father	Signed Father
Signed Mother	Signed Mother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the
HENDRICKS County Cou	art by written order issued
in authorizes and directs the issuance of	a marriage license to the above named parties.
DUTURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
of Indiana dated the Aday of March	, 19 81, authorizing the joining together as husband and wife
an Charles C. Suestall an	d Solly & Marie De La Company
Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of l,	ereby certify that on the
State of Indiana, Groom South State	County State of Drd
State of Indiana, Groom Some Should of Months	Hendricks
of me united in marriage license issued for or	hat purpose by the Clerk of the Circuit Court of
Dated this day of Mosel, 1981	Signed Edwards & Custico
	Final Designation Woulder

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County Date of Application

FEMALE Medical Examination Report Dated_ MALE Name of Physician William a Medical Examination Report Dated_ ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretent shall be fined in any sum not exceeding five hundred dollars (\$500,000)". Name of Physician William MALE APPLICANT Date of Birt Date of Birth State Previous Marital Status: Never Married OR Last Marriage Ended By Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by. Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree No D Yes D 1. Are you now or have you ever been adjudged to be of unsound mind No Yes 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed No D Yes D No Yes If answer is "yes", has the adjudication been removed? No D Yes D 2. Are you afflicted with a transmissible disease No Yes 2. Are you afflicted with a transmissible disease? 3. Are you related to the male applicant closer than second or No B Yes D No Yes 3. Are you related to the female applicant closer than second cousin No WYes D 4. Are you now under the influence of intoxicating liquor No Ves O 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug' No D Yes D No Yes Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children List the full names of any dependent children amore Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No D Yes D No TYes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their suppor 8. Full name of father & Bert Birthplace of father (State or foreign country) Residence of mother (if deceased so state)_ Birthplace of mother (State or foreign country) State of Indiana, State of Indiana. HENDRICKS HENDRICKS County of County of HENDRICKS are & ussell derk 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 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... signs, state facts which render the consent of the other parent unnecessary... State of Indiana, **HENDRICKS** State of Indiana, County of HENDRICKS Signed. 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 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... of Indiana dated the day of Wash Babby & Helms Be it further remembered, the following marriage certificate was filed in my office, to-wit:, 19 84, authorizing the joining together as husband and wife and Janes & Rippy 1, John C. Manne one thousand nine hundred and hereby certify that on the State of Indiana, Groom Dolfing & Helma at Danville and, Bride Janes S. Rippey were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court ofCounty, State of day of Massel , 198 Signed Filed and recorded in accordance with the laws of the State of Indiana this..... Official Designation

Signed Many Jone

Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No	81	
File		

......Circuit Court

County 3-8-81 MALE Date of Application Medical Examination Report Dated 3-2-81 FEMALE Medical Examination Report Dated 3-2-81 Name of Physician James Blank ALL QUESTIONS MUST BE ANSWERED, I.C. 3]-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense Name of Physician_ MALE APPLICANT FEMALE APPLICANT Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce ☑ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound mind? 1. Are you now or have you ever been adjudged to be of If answer is "yes", has the adjudication been removed! If answer is "yes", has the adjudication been removed No Tyes 2. Are you afflicted with a transmissible disease ou related to the female applicant closer than second cousin? No Yes D Are you related to the male applicant closer than second cousin w under the influence of intoxicating liquor? Are you now under the influence of intoxicating liquor No Yes 7. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order of orders issued for their support. Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana. HENDRICKS County of 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 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. signs, state facts which render the consent of the other parent unnecessary. State of India HENDRICKS HENDRICKS County of County of. Mother 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 authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the of Indiana dated the day of March , 19.31., authorizing the joining together as husband and wife Turther remark of State St. 200 And March of March of State of Sta Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, hereby certify that on the day of March one thousand nine hundred and S. at State on the state of the stat State of Indiana, Groom Soltan South Sh. of Hand County, State of and, Bride County, State of Side Were him Signed William C. Me Shair Dated this day of March, 1951... Official Designation Minister Signed Many Jane Reistall LENIDICKE Clerk

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

3-5-81
Date of Application

MARK MARK MARK MARK MARK MARK MARK MARK	Form Prescribed By Indiana State Board of APPLICATION FOR	MARRIAGE LICENSE 3-5-81
Modern Providence Control Management in the control of the control	f I.C. 31-1-3-2	County Date of Application
Menter of Physiciscs All GENEROUS NINES IN ANNEX PROPERTY COMPANY CONTROL OF THE		FEMALE We died Examination Report Dated 3-4-81
Secure of Proposition	MALE 3-4-8	
MALE APPLICANY THE AREA OF TH	Medical Examination stop	Name of Physician
MALE APPLICANY THE AREA OF TH	Name of Physician Physicia	noever procures the issuance of a license to marry by any tasse statement, representation or pretense
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Such a first worder by and only in Sign College or Anthony Control of the Control	0	Previous Marital Status: Never Married & OR
The continued by a fine Cardinal College of the Cardin	Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Additional Decree
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A construction of the control special count can accordance with a control of the	Are you afflicted with a transmissible disease?	2. Are you afficted with a transfer
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Birtiplaced mother illustrate foreign country). State of Indiana. Birtiplaced mother illustrate foreign country). Signed Staphan IV. May. Signed Staphan IV. May. New Address VI.2. Kendingly for. Playedfully for. 44/64. Signed Staphan IV. May. Any of Allens 1981. Consent of Parents, parent or guardian with resident the incomment of the other parent unnecessary. Signed Staphan IV. May. Consent of Parents, parent or guardian with resident the consent of this applicant hereby give consent for this marriage. If only one parent signs, state facts which resider the consent of the other parent unnecessary. Signed State of Indiana. We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Consent of Parents, Parent or guardian with resider the consent of the other parent unnecessary. Signed State of Indiana. Conse	9. Full maiden name of mother Survey 2000	9. Full maiden name of mother Cary
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Signed Si	MENIALIS (88) in Abic continuition ()	
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Signed HENDRICKS County of HENDRICKS Circuit Count Agy of April SERVER AND MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Count Agy of April STARLEY A. JOHNSON Official Designation Marving State of Indiana County, State of INDIANA HENDRICKS County, State of Indiana, Groom STEPPEN MAYO All DANYLLLE Clerk Signed STANLEY A. JOHNSON Official Designation MAY JANE RUSSELL Clerk Circuit Count Signed MAY JANE RUSSELL Clerk	New Address 473 Kimberly In. Playafield, In. 46168	New Address 423 Kimbre On St. Rowalds
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. Signed Signed Mother Signed Moth	Marial) &	E DMarah 21
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. Signed Signed Signed Signed Subscribed and sworn to before me this day of IB Subscribed and sworn to before me this Authorizes and directs the issuance of 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, the soft further remembered, the reward in my office a marriage license issued by the clerk of the STEPHEN MAYO Be it further remembered, the following marriage certificate was filed in my office, to-with the function of the State of Indiana and Parties. STEPHEN MAYO ADAILY A. JOHNSON Me thousand nine hundred and 81 Aday of April Aday of April JOHNSON Official Designation. MINISTER MAY JAHE RUSSELL Clerk Circle Core. Circle Court, State of Indiana. County of the Circuit Court of HENDRICKS County. State of Indiana. County of HENDRICKS County. State of Indiana. Circle Court. Court. Circle Court. Co	Mary Jake Bussell and HENDRICKS	
We, the parents of this applicant bereby 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 Mather Signed Method and sworn to before me this day of	Circuit Court	Jacq Jacquet Clerk HENDRICKS Circuit Court
We, the parents of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. State of India	CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS PARENT OR CHARDIAN
State of Indiana. State of Indiana. County of HENDRICKS sa: Signed Father Mother Subscribed and sworn to before me this day of 19. Clerk Subscribed and sworn to before me this day of 19. Clerk Subscribed and sworn to before me this day of 19. Clerk Subscribed and sworn to before me this day of 19. Clerk Subscribed and sworn to before me this day of 18. Clerk County of HENDRICKS Subscribed and sworn to before me this day of 18. Clerk Clerk Clerk Control by written order issued in the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court STEPHEN MAYO 19. Sold of Indiana dated the 3. day of 19. STEPHEN MAYO 19. STEPHEN	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
State of Indiana. Signed Signed Signed Mother Court Cirk County County County County County County Mother County Mother Signed Signed Signed		
Signed Si	other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
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Signed Signed Father Signed Signed Signed Signed Signed Signed Southeribed 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 Authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court STEPHEN MAYO AND ARRIAGE CERTIFICATE Aday of 19. STEPHEN MAYO AND ARRIAGE LICENSE SAND MARRIAGE CERTIFICATE HENDRICKS Circuit Court STEPHEN MAYO AND ARRIAGE CERTIFICATE AND MARRIAGE CERTIFICA	State of Indiana, HENDRICKS }ss:	State of Indiana,
Signed Mother Mother	County of	HENDRICKS
Signed Mother Subscribed and sworn to before me this Mother Court by written order issued Aday of Court by written order issued Aday of 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 RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Indiana dated the Mother Subscribed and sworn to before me this Aday of Marriage license having been refused to the above named parties, the authorizes and filed RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Marriage license issued by the clerk of the HENDRICKS Circuit Court STEPHEN MAYO And DEBARAH GRIFFITH Methousand nine hundred and SI Mereby certify that on the STEPHEN MAYO AT DANVILLE County of HENDRICKS MANUALLE County, State of INDIANA MENDRICKS County, State of INDIANA MENDRICKS County, State of INDIANA MENDRICKS Signed STANLEY A. JOHNSON Official Designation MINISTER Signed MAY JANE RUSSELL Clerk Clerk Court Mother Mothe	Signed Father	Si3
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 authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the. STEPHEN MAYO Be it further remembered, the following marriage certificate was filed in my office, and DEBARAH GRIFFITH STEPHEN MAYO STANLEY A. JOHNSON The thousand nine hundred and 81 State of Indiana, Groom STEPHEN MAYO at DANVILLE Of HENDRICKS County of HENDRICKS County of HENDRICKS County of HENDRICKS County of HENDRICKS County. State of Indiana, Groom STEPHEN MAYO At DANVILLE Of HENDRICKS County, State of INDIANA DEBARAH GIFFITH Of HENDRICKS County, State of INDIANA Official Designation MINISTER Aday of April 1981 Signed MAY JANE RUSSELL Clerk	Signed	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Lendricks County written order issued and filed authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the day of day		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the LENDRICKS County. Court by written order issued. and filed authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the 3 day of STEPHEN MAYO. And DEBARAH GRIFFITH of Indiana dated the 13 day of DEBARAH GRIFFITH of Indiana, Groom STEPHEN MAYO at DANVILLE state of Indiana, Groom STEPHEN MAYO at DANVILLE of Indiana, Groom STEPHEN MAYO at DANVILLE state of Indiana, Groom STEPHEN MAYO at DANVILLE of HENDRICKS County of HENDRICKS county. State of Indiana, Groom STEPHEN MAYO at DANVILLE state of Indiana, Groom STEPHEN MAYO at DANVILLE county. Stand, Bride DEBRRAH GIFFITH 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. State of INDIANA Dated this 11 day of APril 1981 Signed STANLEY A. JOHNSON Official Designation MINISTER 14 day of APril 1981 Signed MAY JANE RUSSELL Clerk		Subscribed and sworn to before me thisday of
RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the day of marriage license issued by the clerk of the HENDRICKS Circuit Court STEPHEN MAYO , 19 , authorizing the joining together as husband and wife I, STANLEY A. JOHNSON herebused at DANVILLE County of HENDRICKS and Bride DEBRAH GIFFITH State of Indiana, Groom STEPHEN MAYO at DANVILLE 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, State of Indiana Signed STANLEY A. JOHNSON Official Designation MINISTER 14 day of April 1981 Signed MAY JANE RUSSELL Clerk		Clerk
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RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Of Indiana dated the 3 day of 1, 19 day of 1, 2, 3, 4, 4, 19 day of 1, 4, 2, 19 day of 1, 4, 2, 19 day of 1, 19 day of 2, 4, 2, 19 day of 3, 4, 2, 19 day of 3, 4, 2, 19 day of 3, 4, 2, 2, 2, 2, 2, 3, 4, 19 day of 3, 4, 2, 2, 2, 3, 4, 19 day of 3, 4, 2, 2, 2, 3, 4, 2, 3, 4, 2, 3, 4, 3, 4, 3, 4, 3, 4, 3, 4, 4, 4, 4, 5, 4, 5, 4, 5, 4, 5, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6,	HENDRICKS County	Court by a street license having been refused to the above named parties, the
RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	authorizes and directs the issuance	of a marrial visual and filed
of Indiana dated the	DETURN OF THE	a marriage license to the above named parties.
STEPHEN MAYO Be it further remembered, the following marriage certificate was filed in my office, to-wit: me thousand nine hundred and 81 State of Indiana, Groom STEPHEN MAYO at DANVILLE MAYO MENDRICKS County of HENDRICKS County, State of Indiana County, State of India	The Mt 20 amount and it	SE AND MARKET
Be it further remembered, the following marriage certificate was filed in my office, to-wit: The thousand nine hundred and 81 hereby certify that on the 11th day of April State of Indiana, Groom STEPHEN MAYO at DANVILLE County. The 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 11 day of April Signed STANLEY A. JOHNSON Official Designation MINISTER Official Designation MINISTER Signed MAY JANE RUSSELLI Clerk	of Indiana dated the	HENDRICKS Circuit Court
In thousand nine hundred and 81 hereby certify that on the 11th day of April State of Indiana, Groom STEPHEN MAYO at DANVILLE Under the were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of HENDRICKS Dated this 11 day of April 1,19 81 Signed STANLEY A. JOHNSON Official Designation MINISTER Signed MAY JANE RUSSELL Clerk	Be it further remembered, the following many	and 19, authorizing the joining together as husband and wife
State of Indiana, Groom STEPHEN MAYO at DANVILLE of HENDRICKS und, Bride DEBRAH GIFFITH of HENDRICKS County, State of INDIANA County. Dated this 11 day of April Signed STANLEY A. JOHNSON Official Designation Official Designation MINISTER Signed MAY JANE RUSSELL Clerk Clerk Clerk Clerk	STANIEV A TOURSCOOL	office to mit
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 11 day of April Signed STANLEY A. JOHNSON Official Designation MINISTER Signed MAY JANE RUSSELL Clerk	one thousand nine hundred and 81	hereby certify that on the
were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of HENDRICKS Dated this 11 day of April Signed STANLEY A. JOHNSON Official Designation MINISTER Signed MAY JANE RUSSELL Clerk	State of Indiana, GroomSTEPHEN MAYO	at DANVILLE day of April
Dated this. 11 day of April Signed STANLEY A. JOHNSON Official Designation MINISTER Signed April 14 day of April 15 Signed MAY JANE RUSSELL Clerk	and, BrideDEBRRAH GIFFITH	of HENDRICKS , County of HENDRICKS
Dated this. 11 day of April Signed STANLEY A. JOHNSON Official Designation MINISTER Signed April 14 day of April 15 Signed MAY JANE RUSSELL Clerk	were by me united in marriage as authorized by	HENDRICKS County, State of INDIANA
Filed and recorded in accordance with the laws of the State of Indiana this. Signed STANLEY A. JOHNSON Official Designation MINISTER day of April ,19 81 Signed MAY JANE RUSSELL Clerk		
Filed and recorded in accordance with the laws of the State of Indiana this. Official Designation. MINISTER day of April Signed MAY JANE RUSSELL Clerk	Dated thisday of April	1 HENDRICKS
Signed MAY JANE RUSSELL Clerk		Ci. 1 Charles
Signed MAY JANE RUSSELL Clerk	Filed and recorded in accordance with the lea	Official Designation
RUSSELL	the laws of the State of Indiana this	14 MINISTER
RUSSELL		Signed day of April ,19 81
		RUSSELL
		HENDRICKS Circuit Court

Form Prescribed By
the leb under
- 1 /2 Q 1 1 1 1 1 2 m
Effective July 1 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS __County

	<u> </u>
MALE Medical Examination Report Dated 3-5-8/	FEMALE Date of Application
	Medical Examination Report Dated 3-5-8/
Name of Physician Mothy Michaels	Nome of Division 1.
LL QUESTIONS MUST BE ANSWERED, 1 31-1-3-6 prescribed "False statement-Who	Name of Physician Jumothy Mehols ever procures the issuance of a license to marry by any false statement, representation or pretense
all be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	or the issuance of a license to marry by any false statement, representation or pretense
Frest A Middle	FEMALE APPLICANT
ame General L. Gerales	Middle Middle
ate of Birth Morch 26 1948	Date of Birth Man (MW Sottles) Last
lace of Birth (State or forkign country)	Day Year
factionapous, and	Place of Birth (State or foreign country)
esidence Address Street of the County County State	Residence Address Street or R. R. City County State
News Married D OR	1910 Set Joints Pd. Indels, Sendich Ind
ast Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
ast Marriage Ended By Death Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
ate of birth verified by	Date of birth verified by: Birth Certificate Judicial Decree
1 Other (Specify) 1 - reviews Lie W/Piec	
Are you now or have you ever been adjudged to be of unsound mind? No.D Yes D	6 Other (Specify) Driver's Mainse W/ proture
If answer is "yes" has the adjudication been removed? No Ves U	1. Are you now or have you ever been adjudged to be of unsound mind?
Are you afflicted with a transmissible disease?	If answer is "yes". has the adjudication been removed? No□ Yes□
	2. Are you afflicted with a transmissible disease? No ☒ Yes □
Are you related to the female applicant closer than second cousin? No V Yes O Are you now under the influence of intexticating liquor? No V Yes O	3. Are you related to the male applicant closer than second cousin? No. Ves D
Are you now under the influence of industrating inquor? Are you now under the influence of a narcotic drug? No V Yes U	4. Are you now under the influence of intoxicating liquor? No W Yes
	5. Are you now under the influence of a narcotic drug? No Yes O
List the full names of any dependent children.	6. List the full names of any dependent children.
Lovel & Legento	Melonie Settles 4
Brodles M. Leigh 8	
Are you required by any court order or orders to support the above dependent children? No Ves D.	7. Are you required by any court order or orders to support the above dependent children? No ☑ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders/issued for their support/
Full name of father Letter D. George	8 Full name of father Augh strongly Serry
I di marchia ha	
Residence of father (if decreased in state)	Residence of father (if deceased so state) Wonamaker, dudiova
Birthplace of father (State or foreign, country) Indiana	Birthplace of father (State or foreign country) J-neleand
Full mayden name of mother Able & Howard	a sure flower forme Rechards
Par manufer name di monne	9. Full maiden name of mother Co
Residence of mother of decreased so states 3 1/6000 Maffel Co. J. H.	Residence of mother (if deceased so state) Workard Dec, And
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Indicara
tate of Indians. I depose and state the information given	State of Indiana, I denose and state the information given
ounty of HENDRICKS in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
12 Of al in the second	of de A Sattle
Signed and all all all all all	Signed Find to Pols 7
New Address / 100 6/77 Rd Salps, 96231	New Address
ubscribed and sworn to before me this day of Diosch 1987.	Subscribed and sworn to before me this day of Worth, 19.7%.
Mary fone kusself Gerk HENDRICKS Circuit Court	Mary You Russell Clerk HENDRICKS Circuit Court
Clerk	
ONSENT 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 parent
Ve, the parents, of this applicant hereby give consent for this marriage. If only one parent	signs, state facts which render the consent of the other parent unnecessary
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent differences
tate of Indiana.	State of Indiana, HENDRICKS } ss:
ounty of HENDRICKS \$ **:	County of
Signed	SignedFather
	Signed
Signed Mother	Subscribed and sworn to before me this
ubscribed and sworn to before me this day of	Subscribed and sworn to before me this
Clerk	Clerk
	Il above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
HENDOUCVC / A	ourt he written order issued
authorizes and directs the issuance	of a marriage license to the above named parties.
	WARDIAGE CERTIFICATE LIENDRICKS
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
We It Remembered there was filed in my office a marriage tice	the joining together as husband and wife
Indiana dated the day of Massel	Settler Carlos
mould of Line	and Sittles day of Mark
in further remembered, the following marriage certificate was filed in my	beach certify that on the aday of day of
of Indiana C	Company State Of Commencer
of medical form of the state of	County, State of
ere by me united in	
county.	and the same of th
Dated this	Signed Solve C. Mauren
ady of	Official Designation , 19 8 Clerk Signed
The state of the s	Official Designation of Market 19 19 19
iled and recorded in good and it is the state of Indiana this	Clerk
in accordance with the laws of the State of Thanks	Signed HENDRICKS Circuit Cour

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County 3-6-8/
Date of Application

.... Circuit Court

HENDRICKS

MALE 7-5-8/	FEMALE Medical Examination Report Dated 2-5-8/
Medical Examination Report Dated	Name of Physician Walcom Scamahorn
Name of Thysician.	hoever procures the issuance of a license to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding five hamiltonian	FEMALE APPLICANT
MALE APPLICANT Middle Last	Name Bronda do Liturolo
Kewby Venno Lumpter	Date of Birth Month 28 Year 1963
Date of Birth Month Day	Place of Birth (State of foreign country)
Place of Birth (State or forofan/country) Se DONON Situation Country State)	Residence Address Street or R. R. City County State
Residence Address Street or R. R. Pittsboro Hend . State	- R& BOX 15 B Valuables were Ind.
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of officer vertices 5.
Other (Specify) Driver License ypictus	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O
Are you now or have you ever been adjudged to be of unsound mind? No W Yes No U Yes	1. Are you now or have you ever been adjudged to the state of the stat
If answer is "yes", has the adjudication been removed? Are you afflicted with a transmissible disease? No D Yes D	2. Are you afflicted with a transmissible disease. No Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yes -
No Wyes	4. Are you now under the influence of intoxicating liquor? No 2 Yes 1
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.
6. List the full names of any dependent children.	6. List the full hairs of any deposits.
Are you required by any court order or order to when the	7. Are you required by any court order or orders to support the above
Are you required by any court order or orders to support the above dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Full name of father COV Country or	8. Full name of father Couragn of the Setsuler
Residence of father (if deceased so state) Otto Both Incl.	Residence of father (if deceased so state, Sholpile Shid)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother Mary Bello Whipk	Maria Patricia Maria
Residence of mother (if deceased so state) PHS 5000	9. Full maiden name of mother Dittakton and
Birthplace of mother (State or foreign country)	Residence of mother (if deceased so state)
State of Indiana	Birthplace of mother (State or foreign country)
HENDRICKS ss: I depose and state the information given in this application is true and correct.	County of HENDRICKS 88: I depose and state the information given in this application is true and correct.
Signed Howy Tennis Temphin	Signed Brenda Liturilla
New Address 334 M. Darlington Jamestown J.	New Address 334 N. Daslington am
Subscribed and sworn to before me this day of March 1981	Subscribed and sworn to before me this. I day of March, 19.81
Stem M. Harriey Clerk HENDRICKS Circuit Court	A Pugge Duringions
	Circuit Court
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
Ve, 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
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana, ounty of HENDRICKS ss:	State of Indiana,
outry of the same	County of HENDRICKS } ss:
SignedFather	SignedFather
Signed	blog Plining
ubscribed and sworn to before me this	Subscribed and sworn to before me this & day of March 1981.
	Maria lo day of July 1984
OMPLETE IF MARRIAGE LICENSE ISSUED BY OPDER OF	Clerk
HENDRICKS County.	RT. A marriage license having been refused to the above named parties, the court by written order issued and filed
authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE	of a marriage 1:
Drimary	and the lise to the above named parties
Caroly D & day of March	ense issued by the clerk of the HENDRICKS Circuit Court and Dands authorizing the joining together as husband and wife
e it further remembered, the following marriage certificate was filed in	and office, to-wit: hereby certify that on the
the make R	office, to-wit:
ate of Indiana, Groom	at day of 10000
id, Bride Senda Ma	of Hold County of Standard
ere by me united in marriage as authorized by	Hand County, State of Lad
ated this	that purpose by the Clerk of the Circuit Court of HENDRICKS
ated this day of Marriage license issued for	HENDRICKS HENDRICKS
led and recorded in accordance with the laws of the State of Indiana this	Official Designation Mynales
Inaiana this	day of M W

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No	85
File	

Circuit Court

County MALE Date of Application Medical Examination Report Dated FEMALE Medical Examination Report Dated-Name of Physician____ ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense Name of Physician_ FEMALE APPLICANT Date of Birth Date of Birth Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound mind? No P Yes D If answer is "yes", has the adjudication been removed? If answer is "yes", has the adjudication been removed No D Yes D you afflicted with a transmissible disease! 2. Are you afflicted with a transmissible disease No Yes D 3. Are you related to the female applicant closer than second cousin? 3. Are you related to the male applicant closer than see you now under the influence of intoxicating liquor? No W Yes 4. Are you now under the influence of intoxicating liquor 5 Are you now under the influence of a narcotic drug? Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country). State of Indiana, HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary... State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of ...Father 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, theauthorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... day of Much , 19.8/, authorizing the joining together as husband and wife of Indiana dated the ... 134 Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, hereby certify that on the day of Many one thousand at St Joseph's Musel, County of Books, one thousand nine hundred and S State of Indiana, Groom Daniel - to Canyouth 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 Damas & Dimmorman Dated this .. 2 day of March , 19 51. Official Designation Filed and recorded in accordance with the laws of the State of Indiana this....

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

3-9-81 Date of Application

... Circuit Court

MALE 3-4-81	FEMALE Medical Examination Report Dated 3-4-8/
Medical Examination Report Dated	Name of Physician G. M. Senkouce
Name of Physician G. M. Market C. S. Prescribed "False statement—Who	pever procures the issuance of a heense to marry by any false statement, representation or preter
shall be fined in any sum not exceeding the	
MALE APPLICANT	Name Kima les Middle Mauko
Gary D. Vear	Date of Birth Month
7 30 /95 9	Place of Birth (State or foreign country)
Place of Birth (State or) foreign country)	Residence Address Street for B. R. City County State
Residence Address Street or R. R. Street or R. R. Marin Inc.	KITS TOTAL SHOW
Previous Marital Status: Never Married OR	Previous Marital Status Never Married OR Last Marriage Ended By. Death Divorce Annulment D
ast Marriage Ended By: Death Divorce Annulment D	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Driver's License apricture
Other (Specify) Drivers License picture	Other (Specify) Are you now or have you ever been adjudged to be of unsound mind? No P Yes No P Yes
Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes	If answer is "yes", has the adjudication been removed. No Yes
If answer is "yes", has the adjudication been removed? Are you afflicted with a transmissible disease? No Pyes	2. Are you afflicted with a transmissible disease" No P Yes
8. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin" No Yes
. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes
5. Are you now under the influence of a narcotic drug?	Are you now under the initiative of a market of a
List the full names of any dependent children.	
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children" No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	ompliance with any court order orders issued for their support
Full name of father Bull & Wilker	8. Full name of father Donald C. Mayhlur
Residence of father (if deceased so state) Roach clale Ind.	Residence of father (if deceased so state) Indiple Ind.
Birthplace of father (State or foreign country) Indeana	Birthplace of father (State or foreign gountry) In Apl Ind
Full maiden name of mother Phyllis a Charley	9 Full maiden name of mother Shirley a. Bailey
Residence of mother (if deceased so state) Roachdolle Ind.	Residence of mother (if deceased so state) Include Ind.
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country) Inolals Inol.
tate of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana.
County of in this application is true and correct.	County of HENDRICKS as: in this application is true and corre
Signed Duy Mehn	Signed X Gernaly & Marken
New Address 7057 Mariners Way #F	New Address 705/ Mariner May #
ubscribed and sworn to before me this day of THARCA 197	Subscribed and sworn to before me this 9 day of Marches
Of Clerk HENDRICKS Circuit Court	Mary law Kusselfierk HENDRICKS Circuit Coi
ONSENT OF PARENTS, PARENT OR GUARDIAN	
/e, the parents, of this applicant hereby give consent for this marriage. If only one parent	CONSENT OF PARENTS, PARENT OR GUARDIAN
gns, 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 pare
parent differensary.	signs, state facts which render the consent of the other parent unnecessary
ate of Indiana,	
ounty of HENDRICKS ss:	State of Indiana,
SignedFather	County of HENDRICKS
Signed Father Mother	Signed Fath
bscribed and sworn to before me this day of , 19	SignedMoth
	Subscribed and sworn to before me thisday of
	a.
HENDRICKS COURSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
County	Tr. A marriage license having been refused to the above named parties, the purt by written order issued and file of a marriage license to the
	and mense to the above named and
The oil Kemembered theme	E AND MARRY
Indiana dated the day of day of	use issued by the clerk of the HENDRICKS Circuit Countries and with the clerk of the HENDRICKS Circuit Countries and with the clerk of the HENDRICKS Circuit Countries and with the clerk of the HENDRICKS Circuit Countries and with the clerk of the HENDRICKS Circuit Countries and the clerk of the HENDRICKS Circuit Countries and the clerk of the Countries and the clerk of the Circuit Countries and the clerk of the clerk
e it further remembered the fill	, 19 , authorizing the joining together as hyshand and wi
e it further remembered, the following marriage certificate was filed in my on the thousand nine hundred and	fice, to-wit:
the thousand nine hundred and the thousand nine hundred and this the united in marriage as authorized by a marriage license issued for a ted this.	hereby certify that on the
ate of Indiana, Groom. Doug D. Drel	at Bridgepot day of Wach
d Pride	County of
re by me united in marriage as authorized by a marriage license in the sunty.	Horal County, State of
ere by me united in marriage as authorized by a marriage license issued for uted this day of , , 19.8	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19 8	Jr., e
led and recorded in accordance with the	Official Designation of Many Desetts St
led and recorded in accordance with the laws of the State of Indiana this	Official Designation White
	day 1

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

MALE	
Medical Examination Report Dated 3-3-81	FEMALE Date of Application
Name of Physician John Bradly	Medical Examination Report Dated 2-2-24-81
Hamis	Name of Physician ames 80 k
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement-Who	Name of Physician James Block oever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	procures the issuance of a license to marry by any false statement, representation or protogon
Name Pirat Middle	
Jeffry M Busnall	Name Of First
Date of Birth Pay Year	Date of Birth Month Mulene News 0
Place of Birth (State or tyreign country)	Day Year
Residence Address Street or R. R. City County	Place of Birth (State, or foreign country) 2 1960
IND Late the temps of position	Residence Address Street or R. R. City
Previous Marital Status Never Married OR	POBOY 94 Petty kow He and State
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Marry I.D. Water	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes U	Other (Specify)
If answer is "yes" has the adjudication been removed? No D yes D	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes O	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No O Yes O	2. Are you afflicted with a transmissible disease? No Yes
4. Are you now under the influence of intoxicating liquor? No No Yes O	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Ves D	4. Are you now under the influence of intoxicating liquor? No Yes
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes No Yes
	6. List the full names of any dependent children.
	THE REAL PROPERTY AND INVESTIGATION OF THE PROPERTY OF THE PARTY OF TH
7. Are you required by any court order or orders to support the above. dependent children?	7. Are you required by any and all
No D Tes D	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father gerald Wayne Burnell	compliance with any court order or orders issued for their support
16 10 10	8. Full name of father Hartgel Kane Newell
Residence of father (if decreased so state).	Residence of father (if deceased so state) Outlaboro Incl.
Birthplace of father State or foreign grountry L. Auguelle J	Birthplace of father (State or foreign country) Ollinois
9. Full marden name of mother Sandrag Susan Martin	12++ 2 .10 CM -1.01
Elawill Lal	9. Full maiden name of mother Sucille 11 Josepheld
Residence of mother (if decreased so state)	Residence of mother (if deceased so state) School And.
Birthplace of mother (State or foreign country). Itelemore, and	Birthplace of mother (State or foreign country) Danville Minois
State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana
County of HENDRICKS in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signal (Effrey M Burull	Signed Cherry De Newell
New Address 1048 Isck is St Portemonth Va	
9 m-1 N	New Address 1045 Lackse St., tostomacth, VA
Subscribed and sworn to before me this 7 day of 1/larch 1987.	Subscribed and sworn to before me this day of 7/1000, 1987.
Mary Jane Bussell Clerk HENDRICKS Circuit Court	Mary Jan Susself Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
the consent of the other parent uniteessary	
State of Indiana,	Caste of Indiana
County of HENDRICKS } **:	State of Indiana, HENDRICKS Ss:
	Father
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day of	Subscribed and sworn to before me this
	Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license having been refused to the above named parties, the
HENDRICKS Court	art by written order issued
County	
in	a marriage license to the above named parties.
authorizes and directs the issuance of	a marriage license to the above named parties.
authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license	AND MARRIAGE CERTIFICATE e issued by the clerk of the
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of March	AND MARRIAGE CERTIFICATE e issued by the clerk of the
Be It Remembered, there was filed in my office a marriage licens day of	AND MARRIAGE CERTIFICATE e issued by the clerk of the
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of an Be it further remembered, the following marriage certificate was filed in my office	AND MARRIAGE CERTIFICATE e issued by the clerk of the
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license day of the following marriage certificate was filed in my office the day of the da	AND MARRIAGE CERTIFICATE e issued by the clerk of the
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of and Be it further remembered, the following marriage certificate was filed in my office.	AND MARRIAGE CERTIFICATE e issued by the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the clerk of the poining together as husband and wife d level to day of the clerk of the clerk of the poining together as husband and wife d level to day of the clerk of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of and Be it further remembered, the following marriage certificate was filed in my office.	AND MARRIAGE CERTIFICATE e issued by the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the clerk of the poining together as husband and wife d level to day of the clerk of the clerk of the poining together as husband and wife d level to day of the clerk of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife d level to day of the clerk of the poining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my office and my office an	AND MARRIAGE CERTIFICATE e issued by the clerk of the
Be it further remembered, the following marriage certificate was filed in my office and my office and some thousand nine hundred and state of Indiana, Groom and Bride. State of Indiana, Groom and the state of Indiana, Groom and	AND MARRIAGE CERTIFICATE e issued by the clerk of the, 19. Sl., authorizing the joining together as husband and wife d, 20, authorizing the joining together as husband and wife d, County of, County of, County, State of, County, State of, County, State of, County, State of, County of, County, State of, County of, County, State of, County of, County of, County, State of, County of .
Be it further remembered, the following marriage certificate was filed in my office and my office and some thousand nine hundred and state of Indiana, Groom and Bride. State of Indiana, Groom and the state of Indiana, Groom and	AND MARRIAGE CERTIFICATE e issued by the clerk of the, 19. Sl., authorizing the joining together as husband and wife d, 20, authorizing the joining together as husband and wife d, County of, County of, County, State of, County, State of, County, State of, County, State of, County of, County, State of, County of, County, State of, County of, County of, County, State of, County of .
Be it further remembered, the following marriage certificate was filed in my office and my office and some thousand nine hundred and state of Indiana, Groom and Bride. State of Indiana, Groom and the state of Indiana, Groom and	AND MARRIAGE CERTIFICATE e issued by the clerk of the poining together as husband and wife 19 01, authorizing the joining together as husband and wife described that on the poining together as husband and wife County of poining together as husband and wife County, State of poining together as husband and wife County, State of poining together as husband and wife HENDRICKS County, State of poining together as husband and wife County, State of poining together as husband and wife HENDRICKS Signed County, State of poining together as husband and wife County of poining together as husband and wife HENDRICKS
RETURN OF MARRIAGE LICENSE of Indiana dated the day of an	AND MARRIAGE CERTIFICATE e issued by the clerk of the poining together as husband and wife d. p. p. d. p.
RETURN OF MARRIAGE LICENSE The It Remembered, there was filed in my office a marriage license day of	AND MARRIAGE CERTIFICATE e issued by the clerk of the poining together as husband and wife d. p.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

___County

Date of Application

.... Circuit Court

HENDRICKS

7-4-2-1	FEMALE Medical Examination Report Dated 2-23-8/
MALE Medical Examination Report Dated 2-23-9/	0.7 / 1 / 10 404 0
Name of Physician 12.6 prescribed "False statement—Who	Name of Physician ever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED 4.C. 31-13-6 prescribed by shall be fined in any sum not exceeding five hundred dollars (8500,00).	
MALE APPLICANT	Name First Middle Markon Parker
Name / First Middle Shadweck	Date of Birth Month Pay Yar 9 8
Date of Birth Mopth Day Year	Place of Birth (State or foreign country)
Place of Birth (State or foreign Jountry)	D. D. Can County Said
State City County State	Residence Address Street or R. R. Disursalura State
Residence Address Street of R. W. Maryfield	Previous Marital Status Never Married GOR
Previous Marital Status: Never Married OR	Marriage Ended By Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment D	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	h) house
Other (Specify) Who Secure	Other (Specify) No Tyes Other adjudged to be of unsound mind?
1. Are you now or have you ever been adjudged to be of unsound mind?	 Are you now or have you ever been adjudged to be of unsound mind? No □ Yes □ If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease. No Yes C
2. Are you afflicted with a transmissible disease?	Are you related to the male applicant closer than second cousin? No Yes C
3. Are you related to the female applicant closer than second cousin.	4. Are you now under the influence of intoxicating liquor? No Vest
 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? 	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children,	6. List the full names of any dependent children
Wm. Fourlas Shadweek II	
with the way	
	7. Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Istlima Madweek	8. Full name of father / and fully fill for the father for the fat
Residence of father (if deceased so state)	Residence of father (if deceased so state) Thursduing . In
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Tositta Gultan	9. Full maiden name of mother / Jonna lucker
Residence of mother (if deceased so state) Plainfield, In	Residence of mother (if deceased so state) Braunslang, Va.
	12-10
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information give
County of HENDRICKS ss: In depose and state the information given in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct
Signey Villiam Douglas Madurck	Doria Gronela Jador
New Address. 225 N. Adams	225 N G Arms
Subscribed and sworn to before me this. O day of Man: 198/.	New Address N. Cally No. 1 8
W .O D	Subscribed and sworn to before me this day of 1944
Clerk HENDRICKS Circuit Court	I fary and Trackle Gerk HENDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSERVE OF PARAMETER PARAM
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 paret
signs, state lacts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, HENDRICKS ss:	State of Indiana,
County of HENDRICKS	County of HENDRICKS
Signed Father	Signed Father
Signed Mother	
Subscribed and sworn to before me this day of 19	Signed Moth
4762.	Subscribed and sworn to before me this day of 19
Clerk	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County	ourt by written order issued and file
authorizes and directs the issuance	ourt by written order issued and file of a marriage license to the desired and file
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Country A. C.
of Indiana dated the day of Moscoh	to be clerk of the HENDRICKS Circuit Cour
Be it further remembered, the following marriage continue	and and office, to-wit:
I John C. Mauxon	office, to-wit:
State of Indiana, Groom Deliano	hereby certify that on the day of County of Hand
County a marriage license is a second	County State of
Dated this.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of Massel 197	
	Signed Signed
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
Thatana this	and day of Massel ?
	The state of the s

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

...Circuit Court

MALE Medical Examination Report Dated 2-26-81	FEMALE Date of Application
	Medical Examination Report Dated 2-26-81
Name of Physician AM Odwards	
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—W)	name of Physician Will Delivard
shall be fined in any sum not extending the number dollars (\$500,00)". MALE APPLICANT	Name of Physician W. Columnol. hoever procures the issuance of a license to marry by any false statement, representation or pretense
Name First / Middle 7:	FEMALE APPLICANT
Malph Welson Tucked a	First . Middle
Date of Birth Park	Date of Birth Month Ann Lubbard
Place of Birth (State or foreign country)	Day Year
Residence Address Street of B. R. County State	Place of Birth (State or foreign country)
222 Wayside Herrafield State	Residence Address Street op R. R. City - County State
Previous Marital Status: Never Married OR	Tlangeld .
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate U Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other(Specify)
If answer is 'yes' has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
No U Yes U	If answer is "yes", has the adjudication been removed? No Ves U
Are you related to the female applicant closer than exceed and a	2. Are you afflicted with a transmissible disease?
100	3. Are you related to the male applicant closer than second cousin?
No + 1es C	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above	7. Are you required by
dependent children" No 🗆 Yes 🗅	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support	compliance with any court order or orders issued for their support.
Full name of father full with the first with the first with the father full full full full full full full ful	8. Full name of father Toda C. Hubbard
Residence of father (if deceased so state)	Residence of father (if deceased so state) Jame
Birthplace of father (State or foreign country) / line	Birthplace of father (State or foreign, country) And.
Full maiden name of mother Donna C. Waller	4 4 4
By and a second	9. Full maiden name of mother Thankly A. Dumpken
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
county of	County of in this application is true and correct.
Signed Ragh Wilson Michals Jr.	Signed for Ann Harbard
New Address 2037 N. Winton Indele	New Address 2037 N. Winton, Indgela.
Subscribed and sworn to before me this 10 a day of Mars . 195/.	Subscribed and sworn to before me this / day of Mar. 198/.
1/21/2 A A A HENDRICKS	M HENIDDICKS
HI WILL Gerk Chronic Circuit Court	Mary Ame Tusself Clerk MICHARICKS Circuit Court
ONSENT OF BUILDING BUILDING	CONSTRUCTION DADRATE OF CHAPPIAN
ONSENT OF PARENTS. PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
ve. 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
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
The state of the s	
tate of Indiana,	State of Indiana, HENDRICKS ss:
unty of HENDRICKS	County of
Signed Father	SignedFather
Signed Mother	Signed
	Subscribed and sworn to before me thisday of, 19
bscribed and sworn to before me this day of , 19	Clerk
Clerk	
OMPLETE LE MARRALE LA COURT DE COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS Comments	ourt by written order issued and filed
County	f a marriage license to the above named parties.
authorizes and directs the issuance o	
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen	ise issued by the color of the
Indiana dated the VILA	nd
a constant of the constant of	nd
tememoered, the following marriage certificate was filed in my o	thereby certify that on the
The state of the s	County of Marian
ate of Indiana, Groom Rales D. Johnson	of Hard County, State of And
of Indiana, Groom & alake Weller	County, State of
of	that purpose by the Clerk of the Circuit Court of HENDRICKS
by me united in marriage as authorized by a marriage license issued for	that purpose of the
ated this day of March , 19 dl	and Moss 5 House
day of Links	
led and recorded in accordance with the laws of the State of Indiana this	Official Designation , 19 5
ed and recorded in accordance with the laws of the State of Indiana this	all day of Revell Clerk
accordance with the tails of the black	UENIDPICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

ile_	42	

3-11-81 Date of Application

	FEMALE Medical Examination Report Dated 3-10-81
MALE Medical Examination Report Dated 3-10-51	X
	Name of Physician
Medical Examination Report Dated Name of Physician	never procures the issuance of a license to marry by any false statement, representation or pretens
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement" was shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
shall be fined in any sum not exceeding five hundred MALE APPLICANT	First Middle Last
Name First Middle (Slad)	Name Rondo Hours
Date of Birth Month Day Year	Date of Birth Month
	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	KI Day
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By. Death Divorce Annulment Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
1 Other (Specify) Dures him we peat	10 Other (Specify) Drivers for whether
Other (Specify) No Yes 1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No W Yes C
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed. No Yes
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No S yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin No ♥ Yes □ No ♥ Yes □ No ♥ Yes □
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Tyes C No Tyes C
5. Are you now under the influence of a narcotic drug?	Are you now under the introduce. List the full names of any dependent children.
6. List the full names of any dependent children.	0. List the fair manual 2
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children." No U Yes L If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are it.
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support. 8. Full name of father was blow of the court order or orders issued for their support.	8. Full name of father Harblan & . House
Residence of father (if deceased so state)	1.2119
	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother 3 thouse the towell	9. Full maiden name of mother to down how
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana,
	County of HENDRICKS and this application is true and correct
Signed & Limsthy of Daled	Signed & Honda G. Dawk,
New Address RR & Box 48 Clayton 29 46	
Subscribed and sworn to before me this day of Mossel 1981	e l
Mary Jana Russoll - HENDRICKS	Subscribed and sworn to before me this day of 11 (201) 19.91
Clerk TIETONICKS Circuit Court	Many four Pulled aerk HENDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONGRAGO
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 paren
of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of July
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS
Signed Father	
Signed Mother	SignedFather
Subscribed and sworn to before me this	Signed Mother
Subscribed and sworn to before me this day of	Subscribed and sworn to before me thisday of19
Clerk	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COMP	
HENDRICKS County Swall	RT. A marriage license having been refused to the above named parties, the
in Sext O authorizes and directs the in-	ourt by written order issued and files
Be It Remembered there was Chair MARRIAGE LICENS	E AND MARRIAGE CERTIFICATION
of Indiana dated the	tooked by the clork of the
Be it further remembered, the following marriage certificate was filed in my of I,	nse issued by the clerk of the HENDRICKS Circuit Cour
be a jurther remembered, the following marriage certificate was filed in my	office to with
I,	hereby coutify it
one thousand nine hundred and S State of Indiana, Groom S and, Bride S were by me united in marriage as authorized by a marriage I	hereby certify that on the 2 day of March of Hard County of Hard
and Bride De Com	of Hard, County of Hard
were hy me united in	County, State of
and, Bride	that memory ! County, State of
were by me united in marriage as authorized by a marriage license issued for Dated this day of March	purpose by the Clerk of the Circuit Court of HENDRICKS
The state of the s	

Official Designation.

HENDRICKS

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

APPLICATION FOR MARRIAGE LICENSE

No	91
File	

HENDRICKS County 3-11-8)
Date of Application MALE 3-10-81 Medical Examination Report Dated_ FEMALE Medical Examination Report Dated 3-10-8 Name of Physician Name of Physician_ ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense MALE APPLICANT FEMALE APPLICANT Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decre Other (Specify 1. Are you now or have you ever been adjudged to be of unsound mind If answer is "yes", has the adjudication been removed? If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? 2. Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin? 3. Are you related to the male applicant closer than second cousing 4. Are you now under the influence of intoxicating liquor? 4. Are you now under the influence of intoxicating liquor? No Ves D 5. Are you now under the influence of a narcotic drug? Are you now under the influence of a narcotic drug? List the full names of any dependent children 7. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children? No□ Yes□ No T Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, State of Indiana, HENDRICKS HENDRICKS County of .. 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 County County Court by written order issued 3 day waves and filed 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. M., 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-withhereby certify that on the County o Danville one thousand nine hundred and State of Indiana, Groom Jely Hend 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.

Official Designation.

.Clerk

Circuit Court

HENDRICKS

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

HENDRICKS

... Circuit Court

Effective July 1. 1871	FEMALE Medical Examination Report Dated 3-4-8/
MALE Medical Examination Report Dated 3-4-8/	Name of Physician Varnut Warris, Mil.
Medical Examination Report Date Chywrods Mr.	Name of Physician ver procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
Name of Physician 72 NewEPED 1C 31-1-3-6 prescribed "False statement—Whoe	ver procures the issuance of a occur
shall be tined in any sain not	Middle I last
MALE APPLICANT Middle 1 1 Last	Name Roseland Me Campbell
Name Thanks I Kanapus	Date of Birth Month
Date of Birth Month Day 1942	Place of Birth (State or toprigh country)
Place of Birth (State or foreign country)	Residence Address Street or R. R. Cits County State
desidence Address Street or R. B. Street or R. B.	9/8 Deglearas on many on
1-1. Por	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment C	Last Marriage Ended By Death Divorce Affinilment Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth vernice of
driving his Chieture	Other (Specify) Other was ever been adjudged to be of unsound mind* No Fee D
Other (Specify) No Tyes No T	1. Are you now or have you ever been adjudged to be of unsound mind? No Tes D If answer is "yes", has the adjudication been removed? No D Yes D
If answer is "yes", has the adjudication been removed?	If answer is yes mas the stransmissible disease" No Yes D
Are you afflicted with a transmissible disease?	3 Are you related to the male applicant closer than second cousin. No.D.Yes D
3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor?	4 Are you now under the influence of intoxicating liquor? No Tes O
5. Are you now under the influence of modificating index.	5. Are you now under the influence of a narcotic drug? No Fes D
5. List the full names of any dependent children.	6. List the full names of any dependent children
	Tixchelle Nation
	Wishing Kaymond
. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children No Pres O
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order of orders issued for their support.
3. Full name of father Thomas Ellert Panabes	8. Full name of father Charles graning
Residence of father (if deceased so state) unfortune	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Advita Jane Earl	9 Full maiden name of mother Shatty Journ Maler
Residence of mother (if deceased so state) Mitchill, St.	Residence of mother (if deceased so states Jalan full, 32)
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Max: I depose and state the information gives in this application is true and correct
County of	County of HENDRICKS
Signed thomas Carolina Colonia	Signed LOCKBOA THE CHERT
New Address 918 Highlander Dr. Hell Ind	New Address 9/8 Negletandze Mr.
Subscribed and sworn to before me this day of flock 190	Subscribed and sworn to before me this day of the sword to before me this
Mary Head Clerk HENDRICKS Circuit Court	Mary Jane Susselfaerk HENDRICKS Circuit Cour
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
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
	The state of the s
	The state of the s
	при
State of Indiana, County of HENDRICKS ss:	State of Indiana,
SignedFather	County of HENDRICKS
	Signed
Signed Mother Subscribed and sworn to before me this	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of18
Clerk	Clet
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLU	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County C	ourt by written order issued and file
authorizes and directs the issuance	of a marriage license to the above named postion
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	ase issued by the clerk of the HENDRICKS Circuit Cow
Be it further remembered, the following marriage certificate was filed in my	nse issued by the clerk of the HENDRICKS Circuit Countries, 1921, authorizing the joining together as husband and will
Be it further remembered, the following marriage certificate was filed in my	office to with
one thousand nine hundred and. 5	hereby certify that
one thousand nine hundred and 5 State of Indiana, Groom and Bride and Bride of were by me united in marriage as authorized by	at Daney
and Bride & a Day I M	of told County of
and, Bride of Indiana, Groom of the state of	County, State of
Country and marriage license in	County State of
Dated this day of Mand 19	The Circuit Court of
	Signed Comments
Filed and recorded in accordance with the laws of the State of Indiana the	Official Designation

APPLICATION FOR MARRIAGE LICENSE

HENDRICK	County 3-11-31
MALE	Date of Application
Medical Examination Report Dated 3-10-81	FEMALE Medical Examination Report Dated 3-10-81
Name of Physician Haggard	Name of Physics
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a lime
MALE APPLICANT	Il a needse to marry by any false statement, representation or pretense
Name First Middle Last	Name First
Date of Birth Month Day Year	Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address Street or R. R. City County	Place of Birth (State or foreign country)
Residence Address State of R. R. City R. County State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: R Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
& Other (Specify) Dusers fix w/ pect	& Other (Specify) Daviero his at print
1. Are you now or have you ever been adjudged to be of unsound mind? No 🗘 Yes 🗆	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No □ Yes □	If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease? No → Yes □ 3. Are you related to the female applicant closer than second cousin? No → Yes □	2. Are you afflicted with a transmissible disease?
3. Are you now under the influence of intoxicating liquor? No → Yes □ No → Yes □	3. Are you related to the male applicant closer than second cousin? No♥ Yes□
5. Are you now under the influence of a narcotic drug? NoV Yes	4. Are you now under the influence of intoxicating liquor? No Q Yes 5. Are you now under the influence of a narcotic drug? No Q Yes No Q Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support
8. Full name of father Except H. Holmes	8. Full name of father was Sweating Willer
Residence of father (if deceased so state) PMa Qual.	Residence of father (if deceased so state) Brown and Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Hallat W. Wallatte 9.	9. Full maiden name of mother 2 are a landause
Residence of mother (if deceased so state) P. H. J. J. M.	Residence of mother (if deceased so state)
Con Contraction of the Contracti	Residence of mother (if deceased so state)
State of Indiana, I depose and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given
County of HENDRICKS in this application is true and correct.	County of HENDRICKS Sas: I deliber and state the internation is true and correct.
Signed Marked S. Holmes	Signed & Legal a Language
New Address 50 Port Sylvia Apt. C	New Address 50 Part Sylva apt 10
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19,
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS \$85:	Councy Councy
Signed Father	Signed Father
Signed Mother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 19,
	Clerk
	T. A marriage license having been refused to the above named parties, the
HEVIDDICKS CO	ourt by written order issued
HENDRICKS County Co	of a marriage license to the above named parties.
TOTAL TICENS	E AND MARRIAGE CERTIFICATE LIENDDICKS
Be It Remembered, there was filed in my office a marriage licen	nse issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated theday of	
Wiss Dill and A Day as a	ina
Be it further remembered, the following marriage certificate was filed in my o	day of Market on the day of Market
, Daniel C. Clare	County of Show,
one thousand nine hundred and State of Indiana Communications of Market Halves	County State 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
County.	Signed Dock E Crosses
Dated this day of March, 198	Signed

Official Designation......day of

HENDRICKS

Circuit Court

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

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

.... Circuit Court

HENDRICKS

of I.C. 31-1-3-2 Effective July 1, 1977 HENDRICE	Date of Application
MALE Medical Examination Report Dated 2-23-51	FEMALE Medical Examination Report Dated 2-21-81
Medical Examination Report 2	Name of Physician Hossis
Name of Physician	pever procures the issuance of a license to marry by any false statement, representation or preter
shall be fined in any sum not exceeding five hundred dollars (8500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name First Middle Markey	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)	Mostravello glad.
Residence Address Street or R. R. City County State	Residence Address Street or R. R. Clayton, Old State
210 S. Duke Bridget Dra.	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Date of Dirth Verliled by: D Birth Certificate States and States a	Other (Specify) Duise Lio of Riet-
Other (Specify) Note: Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No Ves
1. Are you now or have you ever been adjudged to be of dissound infinite.	If answer is "yes", has the adjudication been removed No ☐ Yes
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? No Yes	2. Are you afflicted with a transmissible disease No X Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yes
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? Not Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No. Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No □ Yes
dependent children? No U Yes U If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Charles f. MCK Muy	8. Full name of father Brange S. Person
Residence of father (if deceased so state) Bridge as A. S.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Many & Manhow	1 6 2
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
County of HENDRICKS 88: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS See: I depose and state the information gives in this application is true and correct in this application is true and correct in this application.
Signed David & Mckinney	Signed X Kimberly L. Pierce
New Address 170 SBURKE	Signed X & MOULY & COURT
Subscribed and sworn to before me this day of March 1981	New Address 2170 S. Buke
Many for Russell Clerk HENDRICKS Circuit Court	Subscribed and sworn to before me this day of Mouse, 19.
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
igns, 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 pare
the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, HENDRICKS ss:	State of Indiana,
J. Control of the con	County of HENDRICKS 88:
SignedFather	
Signed	Signed
ubscribed and sworn to before me thisday of19	Signed Mother
	Subscribed and sworn to before me this day of 19
Clerk	
HENDRICKS LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
County Co	T. A marriage license having been refused to the above named parties, the nurt by written order issued and file
authorizes and directs the issuance of	f a marriage license to the
DETUDN OF THE	to the above named parties.
Be It Remembered, there was filed in my office a marriage licen. Indiana dated the day of Mach	se issued by the clerk of the
David & MCK: day of March	the issued by the clerk of the HENDRICKS Circuit Country of the HENDRICKS Circuit Country of the pointing together as husband and will fice, to-wit:
Be it further remembered, the following marriage certificate was filling	nd
Contract of the state of the st	mce, to-wix.
ne thousand nine hundred and S	nd the fice, to-wit: hereby certify that on the 21 day of Mark of Hand, County of Hand
ate of Indiana, Groom Round of MCKANA	County of House
ere by me united in	Lounty State of Dad
ere by me united in marriage as authorized by a marriage license issued for tated this. day of Model 198	that purpose by the Clerk of the Circuit County of HENDRICKS
ated this day of Market 19.8	mut purpose by the Clerk of the Circuit Court of HENDRICKS
1981	****
	Signed
iled and recorded in accordance with the laws of the State of Indiana this	Official Designation Posts

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

No	95
File	

... Circuit Court

MALE 2 - 2 - 2/	Date of Application
Medical Examination Report Dated 2-27-8/	FEMALE
Name of Physician B. A. Martz	Medical Examination Report Dated 2-27-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement, 113	Name of Physician B. L. Mutz
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician B. L. Mulls noever procures the issuance of a license to marry by any false statement, representation or pretense
Name / First / Middle	FEMALE APPLICANT
Date of Birth Month Day Marks	First Middle
Place of Birth (State or foreign country) Place of Birth (State or foreign country)	Date of Birth Month Day Matthurs
Merin Collector S.	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 Board by
Previous Marital Status: Never Married OR	28 Shornleigh B. B. County State
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
	Other(Specify)
If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? Note Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? No ☐ Yes ☐ 4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.	5. Are you now under the influence of
6. List the full names of any dependent entituren.	6. List the full names of any dependent children.
	THE TAXABLE PROPERTY OF THE PR
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order op orders issued for their support.
8. Full name of father Bull 2. Marts	8. Full name of father Letth Weisstern Matthews
Residence of father (if deceased so state) Bruwnsbury In-	Residence of father (if deceased so state) Brown Share In
Birthplace of father (State or foreign country) Mulini	Birthplace of father (State or foreign country) Indiana
9. Full maiden name of mother Mary E. Halder	
Residence of mother (if deceased so state) Brawnslawy	9. Full maiden name of mother Phiffley Jolla Walson
Birthplace of mother (State or foreign country) South Caruling	Residence of mother (if deceased so state) Mallons (May)
State of Indiana,	Birthplace of mother (State or foreign country)
County of HENDRICKS I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS State of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct.
Signed Michael Comante	Market Mothers
New Address 78 THORNLEIGH	New Address 28 Thornligh Dr.
Subscribed and sworn to before me this 12 day of Merch 1981	1. 72 1 0
Marie Clark President HENDRICKS	Subscribed and sworn to before me this day of HENDRICKS
Circuit Court	May Jane Misself Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
and constitution of the other parent uninecessary	
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS Sss:
Sounty of the territory	
Signed	SignedFather
Signed Mother	Signed Mother
subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
Clerk	Clerk
OMDI DID	A service license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS	rt by written order issued and filed
Countycountycountyauthorizes and directs the issuance of	a marriage license to the above named parties.
authorizes and directs the issuance of	A MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage licens	
f Indiana dated the 20th day of Much	19.01, authorizing the joining together as hasoand and wife
an an an an an an an an	d Dayle Peller 11 form
e it further remembered, the following marriage certificate was filed in my off	
Les & Bollville he	ereby certify that on the 28 day of March,
ne thousand nine hundred and at	County, State of Side
	County, State of
ere by me united in marriage as authorized by a marriage license issued for the	nat purpose by the Clerk of the Circuit Court of HENDRICKS
ated this day of Mossil 1971	· Signed hazzu & Bollwill
8	fficial Designation.
iled and recorded in accordance with the laws of the State of Indiana this	
	Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS __County

HENDRICKS

... Circuit Court

3-12-81 Date of Application

	Medical Examination Report Dated 3-8-8/
MALE Medical Examination Report Dated 3-8-8/	My phan Made
1 20/1 / 20/100	Name of Physician
Name of Physician 770000 Value 70000	never procures the issuance of a license to marry by any false statement, representation or preter
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who	aver products on
shall be fined in any sum not exceeding the many	FEMALE APPLICANT
MALE APPLICANT	Name First
Name First Middle Melson	Date of Birth Month Day Year
Date of Birth Month Day Year 1955	5 2 1755
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
States	Residence Address Street of B. R. City County State
Residence Address Street or R. R. P. City Gonny County Cou	4603 W. 13 St. Merges Marion Sing
	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married O N	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Quince Land Ynich
Other (Specify) drivers License of sicture	Other (Specify) Driver Sicense picture
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed."
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease. No Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No BYes
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes
	dependent children? No U Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	
compliance with any court order or orders issued for their/support. 8. Full name of father Support	compliance with any court order or orders issued for their support.
C. Full haine of father 25 5 5 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	8. Full name of father Connection Cartery
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Sadvana	Birthplace of father (State or foreign country) Suespe Sues.
9. Full maiden name of mother Dorothy M. Buth	9. Full maiden name of mother Plancy Jake Thomas
1 2/41/	
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Sight Ind.
Birthplace of mother (State or foreign country) Sudplo . Ind.	Birthplace of mother (State or foreign country) Such Such
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, I denose and state the information give
1/	County of HENDRICKS ss: in this application is true and corre
Signed X let L. Wilcon	signed & Carter
New Address 620 Kentucky Plainfield In	0 1
	New Address 620 Kentucky, 1
Subscribed and sworn to before me this day of March, 18	Subscribed and sworn to before me this /2 day of March, 1981
Wary Jane Guste Clerk HENDRICKS Circuit Court	1/ Jary Jane Busselfaerk HENDRICKS Circuit Cou
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 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 pare
	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
Signed	County of HENDRICKS
Signed Father	Signed Father
Signed	
Subscribed and sworn to before me thisday of19	Signed Moth
Clerk	Subscribed and sworn to before me thisday of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of	A marriage license having been refused to the above named parties, th
inauthorizes and directs the issue	urt by written order issued and file
PETHEN OF THE	to the above named parties.
of Indiana dated the	se issued by the clerk of the HENDRICKS
of Indiana dated the	19.8/ Circuit Cour
Be it further remembered, the following marriage certificate and fill in an	nd
I, tash Eden	tice, to-wit! Laster
I, some thousand nine hundred and SI State of Indiana, Groom South Signal Signa	nereby certify that on the
one thousand nine hundred and S State of Indiana, Groom Sant S and, Bride of were by me united in marriage as authorized by a marriage license issued for t Dated this day of S	et Shaplo. day of March
and, Bride	of Hours County of Masses
were by me united in marriage as authorized 1	Marien County, State of Dad
County. County a marriage license issued for t	hat purpose by the Cl
were by me united in marriage as authorized by a marriage license issued for t Dated this day of 1951	og the Clerk of the Circuit Court of HENDRICKS
, 19 5	****
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Ordaned Minister
o, Indiana this	als day of Markettel

MALE

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	97
File	Windred when Albert
71	lav. 13. 1981
الاستارا	Date of Application

Clerk ... Circuit Court

2-21-81 Medical Examination Report Dated FEMALE Medical Examination Report Dated_ Name of Physician_ Name of Physician_ ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense MALE APPLICANT FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce ♠ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? No Yes O No D Yes D If answer is "yes", has the adjudication been removed? No Tyes Are you afflicted with a transmissible disease? No VYes D 2. Are you afflicted with a transmissible disease? No Yes D Are you related to the female applicant closer than second cousin No W Yes 3. Are you related to the male applicant closer than second cousin? No D Yes D Are you now under the influence of intoxicating liquor? No V Yes 4. Are you now under the influence of intoxicating liquor? No D Yes D 5. Are you now under the influence of a narcotic drug? No TYes D List the full names of any dependent children 6. List the full names of any dependent children Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No Yes No O Yes O If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support Birthplace of father (State or foreign country) 9. Full maiden name of mother // aryone Residence of mother (if deceased so state) Residence of mother (if deceased so state)_ Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana,
HENDRICKS State of Indiana. County of..... Signed Robert Buch 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 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..... signs, state facts which render the consent of the other parent unnecessary.... State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of Father Signed. Signed. ...day of..... Subscribed and sworn to before me this..... 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 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..... of Indiana dated the day of Market was filed in my office, to-wit: at Bainbridge, County of Petramo, one thousand nine hundred and S State of Indiana, Groom Robert W. Bushe of How. County, State of Judge and, Bride County, State of God Were by Were by Were by State 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. Signed Oley Y. Shipley Dated this 3 day of Spil , 1981. Official Designation Qualto

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

File_	
	3-13-81
	Date of Application

Effective July 1, 1977	DOWALE 2 2 2 2/	
MALE 2 9-8/	FEMALE Medical Examination Report Dated 3-9-8/	
Medical Examination Report Dated	Name of Physician Nu Challes G. Bush Jr.	
Name of Physician Nr. Charles G. State Grand Who	never procures the issuance of a license to marry by any false statement, representation or pretense	
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "raise statements shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT	
MALE APPLICANT	Name First & Middle Pal Last	
Name First Middle Pritchett	Date of Birth Month Day Ryar	
Date of Birth Month Day Year 1943	Place of Birth (State or foreign country)	
Place of Birth (State or foreign country)	Residence Address Street of R. R. OCity , Jeasouth State	
Residence Address Street or R. R. State 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 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 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 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 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 Residence Address Street or R. R. City County State Residence Address Street or R. R. City County Street or R. City County Street	9.5 7 West 9 ares and.	
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment .	
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree	Other (Specify) Namiero Lucinse	
Other (Specify) Writing License	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes	1. Are you now or nave you ever been adjudged to the language of the language	
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? No Yes	2. Are you afflicted with a transmissible disease? No West	
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yes C	
4. Are you now under the influence of intoxicating liquor? No □ Yes □	4. Are you now under the influence of intoxicating liquor? No Pyes C	
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes C 6. List the full names of any dependent children.	
6. List the full names of any dependent children.	6. List the full names of any dependent children.	
- Mala Lynn log 13		
Father has custody		
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	
compliance with any courgorder or orders issued for their support	compliance with any court order or orders issued for their support	
8. Full name of father Carle W. Trute hatt	8. Full name of father Royce To Cleveland	
Residence of father (if deceased so state) The Dankelle on .	Residence of father (if deceased so state) Mankfort, In.	
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Indiana)	
9. Full maiden name of mother / Gelda Beryl Kersey	9. Full maiden name of mother Wonnig L. Rep	
Residence of mother (if deceased so state) Ullased	Residence of mother (if deceased so state) Aankfort	
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (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.	State of Indiana,	
County of In this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.	
Signed & Marian Carl Fretche	Signed Keta Depay Coffeebeller	
New Address RN2Box24F Danille Id	New Address & # 2 you 248 gaswill	
Subscribed and sworn to before me this 13th day of 1981.	Subscribed and sworn to before me this 13th day of March, 198	
The Mary Marie Merk HENDRICKS Circuit Court	Mary Jane Russell Gerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary	
State of Indiana, County of HENDRICKS ss:	State of Indiana,	
Signed	County of HENDRICKS ss:	
Signed Father	SignedFather	
Signed		
Subscribed and sworn to before me this day of 19		
Clerk	Subscribed and sworn to before me thisday of	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	T. A marriage license having been refused to the above named parties, the	
HENDRICKS County	T. A marriage license having been refused to the above named parties, the	
authorizes and directs the issuance o	T. A marriage license having been refused to the above named parties, the urt by written order issued and filed	
	and include to the above named many	
the state of there was flad:	E AND MARRIAGE GEORGE	
Marion & Prital I day of March	ase issued by the clerk of the HENDRICKS Circuit Court and Richard and wife	
Be it further remembered, the following marriage certificate was filed in my of	nd Bitto	
I I I I I I I I I I I I I I I I I I I	mce to alit	
State of Indiana C	hereby certify that on the day of Wareh	
and Bridge (1177)	ounty of	
State of Indiana, Groom Shakes & Shake Soft and Bride Rito State of Market & Shake Soft and Shakes & Shake Shakes & Shakes	County, State of County	
were by me united in marriage as authorized by a marriage license issued for the day of	that marrows! County, State of Jud	
were by me united in marriage as authorized by a marriage license issued for to Dated this day of , 198	that purpose by the Clerk of the Circuit Court of HENDRICKS	
, 19.01	Signed David & 1	
	Signed Allica A	

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

Official Designation.

HENDRICKS

.Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

File_

Circuit Court

Medical Examination Report Dated Name of Physician Place Ducksylvan Ducksylvan ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—With the fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	FEMALE Date of Application
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "Falsoners	Medical Examination Report Dated 3-7-8/
chall be lined in any sum and exceeding live hundred dollars or a set statement W	Name of Physician Spincer (nudges
MALE APPLICANT	oever procures the issuance of a license to marry by any false statement, representation or protection
Name Middle	FEMALE ADDITION
Date of Birth Month Day Wininger	Middle
Place of Birth (State or foreign country)	Date of Birth Month & Hammond
ha.	Place of Birth (State or foreign country)
Residence Address Street or B. R. City County State	Residence Add.
Previous Marital Status Never Married DOR	948 Highlander County State
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Appulment D
Other(Specify)	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever hear adjudged to be at	Other (Specify)
If answer is "yes", has the adjudication been removed? No Yes No Yes	1. Are you now or have you ever been added.
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin?	Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes No Yes	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of t
6. List the full names of any dependent children.	4. Are you now under the influence of intoxicating liquor? No Yes U 5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	No □ Yes □
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Full name of father Harald V. Winings	compliance with any court order or orders issued for their support. 8. Full name of father layer Hammond
Residence of father (if deceased so state)	
Birthplace of father (State or foreign country) and	Residence of father (if deceased so state) Same
Full maiden name of mother Octobra Braune	Birthplace of father (State or foreign country) Unionature
Residence of mother (if deceased so state) Same	9. Full maiden name of mother // flasted Wassess
Birthplace of mother (State or foreign country)	Residence of mother (if deceased so state) Same
ate of Indiana.	Birthplace of mother (State or foreign country) Orb,
ounty of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
the letter.	
Signed Surger Birth 127	Signed Kathy o Hammond
New Address Special Classort RR 18 Box 127	New Address RR 18 BOX 127 Indplo IN 41
becibed and sworn to before me this /3tthday of / 1991.	Subscribed and sworn to before me this day of Mal, 1981.
Ley and Tuasell Clerk HENDRICKS Circuit Court	The Aussilf Clerk HENDRICKS Circuit Court
NSENT OF PARENTS, PARENT OR GUARDIAN	
	CONSENT OF PARENTS, PARENT OR GUARDIAN
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
ns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
te of Indiana, inty of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss;
inty of HENDRICKS ss:	County of
Signed	Signed Father
Signed Mother	Signed
scribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	A marriage license having been refused to the above named parties, the
HENDRICKS County Cour	t by written order issued
authorizes and directs the issuance of a	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
AVAILABLE OF PRINCIPLES PRODUCTION	issued by the clerk of the
We It Remembered, there was filed in my office a marriage license	19, authorizing the joining together as hasound and wife
ndiana dated the	
Indiana dated the day of and and	e, to-wit:
Indiana dated the day of and and t further remembered, the following marriage certificate was filed in my office.	chy certify that on the
t further remembered, the following marriage certificate was filed in my office a marriage license day of and the day of and the day of the following marriage certificate was filed in my office thousand nine hand at	ceby certify that on the County of Hand,
t further remembered, the following marriage certificate was filed in my office a marriage license and the day of and thousand nine hundred and at the following marriage certificate was filed in my office a marriage certificate was filed in my office and thousand nine hundred and at the following marriage certificate was filed in my office a marriage license and the day of the following marriage certificate was filed in my office a marriage license and and the day of the following marriage certificate was filed in my office a marriage license and and the day of the following marriage certificate was filed in my office a marriage license and and the day of the following marriage certificate was filed in my office a marriage license and and the following marriage certificate was filed in my office	County of Lond,
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t further remembered, the following marriage certificate was filed in my office a marriage license and the day of and the further remembered, the following marriage certificate was filed in my office thousand nine hundred and at of Indiana, Groom of Bride of Indiana, Groom	County, State of Ind.,
t further remembered, the following marriage certificate was filed in my office a marriage license and t further remembered, the following marriage certificate was filed in my office thousand nine hundred and at the of Indiana, Groom of the structure of the str	County, State of HENDRICKS The purpose by the Clerk of the Circuit Court of County of
t further remembered, the following marriage certificate was filed in my office a marriage license and t further remembered, the following marriage certificate was filed in my office thousand nine hundred and at the of Indiana, Groom of the sty. Bride the marriage as authorized by a marriage license issued for that the sty.	County, State of County, State of HENDRICKS The purpose by the Clerk of the Circuit Court of County, State
t further remembered, the following marriage certificate was filed in my office a marriage license and t further remembered, the following marriage certificate was filed in my office thousand nine hundred and at the of Indiana, Groom of the sty. Bride the marriage as authorized by a marriage license issued for that the sty.	County, State of Signed Signed Signed County Of Henders of Signed County Of Henders of H

APPLICATION FOR MARRIAGE LICENSE

2 - 16-81 Date of Application

Russo O HENDRICKS

.... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR M	MARRIAGE LICENSE
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977 HENDRICK	S County Date of Application
	FEMALE Medical Examination Report Dated 3-13-81
MALE Medical Examination Report Dated 3-13-81	Name of Physician
	Name of Physician
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoe	ver procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	First Middle Last
Name First Middle Last	Date of Birth Month Day Year
Date of Birth Month Day Year	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Street of R R City County State
Residence Address Street or R. R. City County State R 2 Box 406 Cambry Ind:	10332 D. Herrer Wa. Frake. 10931
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Peath Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	A Other (Specify) Drivers fig. w/pict
Other (Specify) Shires from up peak	1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes D
1. Are you now or have you ever been adjudged to be of unsound mind? No □ Yes □ If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed" No D Yes D
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No № Yes □ 3. Are you related to the male applicant closer than second cousin No № Yes □
3. Are you related to the female applicant closer than second cousin? No Yes □ No Yes □ Yes □ Yes □	4. Are you now under the influence of intoxicating liquor" No P Yes D
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug? No 4 Yes 1
6. List the full names of any dependent children.	6. List the full names of any dependent children
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children" No D Yes D If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Henry Most Pottings	8. Full name of father fack than thousand
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
5. Full market flame of moviet	9. Full maiden name of mother Woodsha Sundata
Residence of mother (if deceased so state) Birthplace of mother (State or foreign country)	00
State of Indiana, I depose and state the information given	State of Indiana. I depose and state the information gives
County of HENDRICKS in this application is true and correct.	County of HENDRICKS ** in this application is true and correct
Signed Manual Signed And Signed A	Signed X Orsella Lelrez
New Address K-2 Box 63 Baker Flac Subscribed and sworn to before me this day of March 1981	New Address J. 2 D J D D D D D D D D D D D D D D D D D
Many Jane Rusel Clerk HENDRICKS Circuit Court	and the second of the second
Circuit Court	HENDRICKS Circuit Cour
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 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
The condition of the other parent unnecessary.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, Country of HENDRICKS } ss:	State of Indiana,
County of	County of HENDRICKS
Signed Father	Signed Father
Subscribed and sworn to before me this day of	Signed Mother
day 01, 19,	Subscribed and sworn to before me this day of 19
COMPLETE IF MADDIAGE LICENSES ASSESSED	Cler
HENDRICKS County	T. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of RETURN OF MARRIAGE ASS	ourt by written order issued and filed
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
of Indiana dated the	the country the clerk of the
Re it further remembered the little Pittman	nse issued by the clerk of the HENDRICKS Circuit Cour
I stank & X M E structure was filed in my o	ffice, to-wit:
one thousand nine hundred and	hereby certify that on the at day of Marian of County of Marian
State of Indiana, Groom Sand Raide Pttman	of Marion Country of Marion
one thousand nine hundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for County.	Hand and County, State of
County of a marriage because :	Country Charles of Lands and
Dated this day of March 198	\
	Signed
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
March States	Signed Many Charles Response Clerk
	The state of the s

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

MALE Medical Examination Report Dated 3-1(-8)	FEMALE Date of Application
	Media 1 P
Name of Physician James Black	Medical Examination Report Dated 3-11-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement But	oever 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)".	oever procures the issuance of a license to marry by any 6.1
MALE APPLICANT	Il any raise statement, representation or pretense
Name First Middle	Name FEMALE APPLICANT
Morman D III a sala	First .
Date of Birth Day Year	Middle Last
Much 62 1951	Date of Birth Month Day Adenator
Place of Birth (State or foreign country)	Pland Pland Start.
Residence Address Street or R. R. City County	Place of Birth (State or foreign country)
Residence Address States City County States	Residence Address Street or R. P. Sudana
SI commence fund, of promiseing fund, of	Street or R. R. City County State
Previous Marital Status: Never Married OR	Juttoboro, Sendrices Sand
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
	Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Research Birth Certificate Undicial Decree	Date of high world 11 Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	#112 10
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) #113-62-076636
To les 2	1. Are you now or have your by
If answer is "yes", has the adjudication been removed?	If answer is "yes" has the adjudical to
2. Are you afflicted with a transmissible disease?	
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease?
1107 1682	3. Are you related to the male applicant closer than second cousin?
NON Tes L	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	
Youman D. Turner II	6. List the full names of any dependent children.
A LO O	
Maskel E. Leismos.	
Di P	
- India a. Muner	
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above
If answer is "ves", it is required that this Application be asset	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their supports.	compliance with any court order or orders issued for their support.
8. Full name of father May allen Suner	
Contra Man to	8. Full name of father James & Aldergton
Residence of father (if deceased so state) Quer Montana	Residence of father (if deceased so state) Nonville Indiana
Birthplace of father (State or foreign country) Uscania	1/- 1
14:1: 34:17	Birthplace of father (State or foreign country) Repliebly
9. Full maiden name of mother Illima Jella Mare	Oulin 17 7/Ded
	9. Full maiden name of mother Hille 4. WOOK
Residence of mother (if deceased so state) The Chambriel, Shokiana	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	The state of the s
	Birthplace of mother (State or foreign country) Mollana
State of Indiana, Gounty of HENDRICKS I depose and state the information given in this application is thus and correct	State of Indiana,
County of HENDRICKS in this application is true and correct.	HENDRICKS ss: I depose and state the information given
	County of HENDRICKS ss: 1 depose and state the information given in this application is true and correct.
Y	
Signed X Multiple Augustian Signed X	
Signed X	Signed Warn Laderson is true and correct.
Signed New Address SI PODERLY AVE	
Signed X	Signed New Address 5 Endenly Over 1
New Address. SI BOORLY ACC. Subscribed and sworn to before me this. I a day of day of 19 07.	Signed New Address 5 Enderly Out On Subscribed and sworn to before me this 16 the Road of March 1984.
New Address SI PODERLY AVE	Signed New Address 5 Enderly Out On Subscribed and sworn to before me this 16 the Road of March 1984.
New Address. Subscribed and sworn to before me this. 10 th Secret March 19 5/. March 19 5/.	Signed New Address 5 Enderly Que and Subscribed and sworn to before me this 16 day of 1997
New Address. Subscribed and sworn to before me this. 1 day of March. 19 5/. Mary Jan Clerk HENDRICKS Circuit Court	Signed New Address 511 Endenly Que Que 1987. Subscribed and sworn to before me this 6 day of Mount 1987. May Que Russell Clerk HENDRICKS Circuit Court
New Address SI BROWN BOKE IN Subscribed and sworn to before one this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	Signed New Address 5 Enderly Out On Subscribed and sworn to before me this 16 the Road of March 1984.
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Subscribed and sworn to before me this day of HENDRICKS Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Signed North Lader of this application is true and correct. Signed North Lader of the Signed New Address. Slice of the Subscribed and sworn to before me this long day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.
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Subscribed and sworn to before me this. Is the Signed. New Address. Subscribed and sworn to before me this. Is the Subscribed and sworn to before me this. Is the Subscribed and sworn to before me this. Is the Subscribed and sworn to before me this.	Signed New Address. Sill Enderly One and correct. New Address. Sill Enderly One and Subscribed and sworn to before me this lower day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed Father Signed Mother
Subscribed and sworn to before me this day of HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Father	Signed North Local Country of Signed New Address SI Country Of Subscribed and sworn to before me this. 6 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Subscribed and sworn to before me this	Signed Normal Land Subscribed and sworn to before me this 16 the Policy Court Subscribed and sworn
Subscribed and sworn to before me this. I day of March 19.7%. May Jaw Method and sworn to before me this. I day of March 19.7%. May Jaw Method and sworn to before me this. I day of March 19.7%. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	Signed New Address SI Enderly the Court Subscribed and sworn to before me this to the Poly of the Court Court Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19. Clerk C. A marriage license having been refused to the above named parties, the
Subscribed and sworn to before me this. 19 December 19	Subscribed and sworn to before me this locked and s
Subscribed and sworn to before me this. 19 December 19	Subscribed and sworn to before me this locked and s
Subscribed and sworn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS ss: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of	Subscribed and sworn to before me this 16 day of HENDRICKS Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of Signed Father Signed Mother Subscribed and sworn to before me this day of Signed Mother Subscribed and sworn to before me this day of Su
Subscribed and sworn to before me this. In the subscribed and sworn to before me this. In the subscribed and sworn to before me this. In the subscribed and sworn to before me this. In the subscribed and sworn to before me this in the subscribed and swo	Subscribed and sworn to before me this located and sworn to before
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Subscribed and sworn to before my this. Subscribed and sworn to before my 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS 58: Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Cerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County on authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Authorizes and directs the issuance of Indiana dated the day of Marriage license day of Marriage li	Signed Subscribed and sworn to before me this lower consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary Signed Subscribed and sworn to before me this day of Signed Signed Subscribed and sworn to before me this application is true and correct. Signed Subscribed and sworn to before me this day of Signed Subscribed and sworn to before me this application is true and correct. Signed Si
Signed New Address Subscribed and sworn to before one this. 10 Gerk 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, County of HENDRICKS Signed Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou	Signed Worm Leader The Andrews Signed Worm Leader The Signed Worm Leader The Subscribed and sworn to before me this 16 day of William 1997. 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 Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Clerk A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to see the solution of the pointing together as husband and wife and Parties to the solutions of the solutions of the pointing together as husband and wife and Parties to the solutions of the s
Signed New Address 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 aligna, 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. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County County of MARRIAGE LICENSE authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE Indiana dated the day of Marriage licens day of Marriage certificate was filed in my office a marriage licens day of Marriage certificate was filed in my office and m	Subscribed and sworn to before me this lower 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 lower 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 A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to the state of the substantial pointing together as husband and wife the country of the country of the pointing together as husband and wife the country of the pointing together as husband and wife the country of
Signed New Address Subscribed and sworn to before me this. I.G. day of March. 19.5%. May July Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County of authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE Indiana dated the day of authorizes and directs the issuance of Indiana dated the day of authorizes and directs the issuance of the it further remembered, the following marriage certificate was filed in my office a marriage licens the it further remembered, the following marriage certificate was filed in my office the thousand when the thousand when the state of the same thousand when the same through through the	Subscribed and sworn to before me this 16 day of HENDRICKS Signed When be added to the shore marriage and correct. Signed When be added to the shore me this 16 day of the shore me this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of the shore me this day of the shore me this day of the shore me this day of the shore me the shore named parties, the and filed a marriage license having been refused to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court the shore me the shore mand the shore mand the shore mand the shore mand the shore me the shore mand the shore me the shore mand the
Signed New Address Subscribed and sworn to before me this. I.G. day of March. 19.5%. May July Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County of authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE Indiana dated the day of authorizes and directs the issuance of Indiana dated the day of authorizes and directs the issuance of the it further remembered, the following marriage certificate was filed in my office a marriage licens the it further remembered, the following marriage certificate was filed in my office the thousand when the thousand when the state of the same thousand when the same through through the	Subscribed and sworn to before me this 16 day of HENDRICKS Signed When be added to the shore marriage and correct. Signed When be added to the shore me this 16 day of the shore me this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of the shore me this day of the shore me this day of the shore me this day of the shore me the shore named parties, the and filed a marriage license having been refused to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court the shore me the shore mand the shore mand the shore mand the shore mand the shore me the shore mand the shore me the shore mand the
Subscribed and sworn to before my this day of day o	Subscribed and sworn to before me this 16 day of HENDRICKS State of Indiana, County of HENDRICKS Signed Subscribed and sworn to before me this 16 day of HENDRICKS Corcuit 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 A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE is sued by the clerk of the 19 quithorizing the joining together as husband and wife day of County of County of County, State of County of County, State of County of County of County of County, State of County of County, State of County, State of County
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Subscribed and sworn to before me this day of derk 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 algens, 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 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County of MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County Marriage Upcens of Indiana dated the day of Marriage Upcens of Indiana dated the day of Marriage Upcens of Indiana dated the day of Marriage Upcens of Indiana, Groom Marriage certificate was filed in my office a marriage Upcens of Indiana, Groom Marriage County Marriage Certificate was filed in my office of the thousand nine hundred and Marriage Marriage Certificate was filed in my office of the parents of the county Marriage Certificate was filed in my office of Indiana, Groom Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certificate was filed in my office of the county Marriage Certifica	Subscribed and sworn to before me this 6 day of Mount. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court authorizing the joining together as husband and wife the county of the count
Subscribed and sworn to before on this day of the Court Court Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of Hendricks Signed Subscribed and sworn to before me this day of 19 County of Hendricks County Cou	Subscribed and sworn to before me this lower parent unnecessary Subscribed and sworn to before me this lower parent unnecessary CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, HENDRICKS Signed Signed Subscribed and sworn to before me this day of Clerk A marriage license having been refused to the above named parties, the rt by written order issued. a marriage license to the above named parties. AND MARRIAGE CERTIFICATE e issued by the clerk of the leave the poining together as husband and wife a county, state of law of leave the leave that the law of leave the leave that on the leave the leave of law of leave the leave that the law of leave the leave that the leave that the leave the leave the leave that the leave the leave that the leave the leave that the leave the lea
Subscribed and sworn to before on this day of the Court Court Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of Hendricks Signed Father Signed Mother Subscribed and sworn to before me this day of 19 County of Hendricks Circuit Court County of Hendricks Signed Father Signed Mother Subscribed and sworn to before me this day of 19 County of Clerk County Count	Subscribed and sworn to before me this lower parent unnecessary Subscribed and sworn to before me this lower parent unnecessary CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, HENDRICKS Signed Signed Subscribed and sworn to before me this day of Clerk A marriage license having been refused to the above named parties, the rt by written order issued. a marriage license to the above named parties. AND MARRIAGE CERTIFICATE e issued by the clerk of the leave the poining together as husband and wife a county, state of law of leave the leave that the law of leave the leave that on the leave the leave of law of leave the leave that the law of leave the leave that the leave that the leave the leave the leave that the leave the leave that the leave the leave that the leave the lea
Subscribed and sworn to before me this Id Edward of Marca 19. Di. Subscribed and sworn to before me this Id Edward of Marca 19. Di. May July 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 sligna, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS 58: Signed Mother 50: Signed Mother 50: Subscribed and sworn to before me this day of 19. Clerk 1	Subscribed and sworn to before me this. 6. day of March 1907. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of 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
Subscribed and sworn to before me this Id Edward of Marca 19. Di. Subscribed and sworn to before me this Id Edward of Marca 19. Di. May July 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 sligna, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS 58: Signed Mother 50: Signed Mother 50: Subscribed and sworn to before me this day of 19. Clerk 1	Subscribed and sworn to before me this. 6. day of March 1907. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of 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
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 parent sligns, 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 COURT HENDRICKS County Coun	Subscribed and sworn to before me this. 6 day of Subscribed and sworn to before me this. 6 day of Subscribed and sworn to before me this for day of Subscribed and sworn to this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. HENDRICKS Signed Signed Mother Subscribed and sworn to before me this day of Signed and sworn to before me this day of Signed Subscribed and sworn to before me this subscribed and sworn to the above named parties. And MARRIAGE CERTIFICATE HENDRICKS Circuit Court of Signed Subscribed to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court of Signed Subscribed to the subspand and wife County of Subscribed to the Subscribed shy the clerk of the County of Subscribed Sub
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 parent sligns, 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 COURT HENDRICKS County Coun	Subscribed and sworn to before me this. 60 day of March County of Mount of the other parent unnecessary. State of Indiana, HENDRICKS Signed Signed Signed Subscribed and sworn to before me this. 60 day of Mount of the other parent unnecessary. State of Indiana, HENDRICKS Signed Signed Signed Subscribed and sworn to before me this. A marriage license having been refused to the above named parties, the rt by written order issued. a marriage license to the above named parties. AND MARRIAGE CERTIFICATE e issued by the clerk of the circuit for ining together as husband and wife of the county, State of the county, State of HENDRICKS Signed Signed Signed County, State of HENDRICKS Signed Signed County, State of HENDRICKS Signed Signed Signed County, State of HENDRICKS Signed County, State of HENDRICKS Signed Signed County, State of HENDRICKS Signed County, State of HENDRICKS

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

42 3-16-8 Date of Application

Health under Authority	ARRIAGE LICENSE S County Date of Application
of I.C. 31-1-3-2 Effective July 1, 1977	770
	FEMALE Medical Examination Report Dated 3-3-8
MALE Medical Examination Report Dated 3-3-8	None of Physician David Haggara
Name of Physician David Naggara	Name of Thysician very by any false statement, representation or pretense over procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
ALL OUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Whoe	SEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED. IC. 33 (\$500,00)". shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	First Middle O Last
Name (First Middle Southorn)	Name Sine a Sud Douen Day Year
Year Year	Date of Birth 6 16 1956
Date of Birth Month Day Place of Birth (State or foreign equnty)	Place of Birth (State or foreign country) Prenantle Suo.
City County State	Residence Address Street or R. R. Statesuch Skend Van
Residence Address Street or R. R. Dungs Miles Day	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Undictal Decree
Date of birth verified by: was Birth Certificate = statistical	Other(Specify)
Other(Specify)	1. Are you now or have you ever been adjudged to be of unsound mind? No Ves D
1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No
3. Are you related to the female applicant closer than second cousin?	Are you related to the male applicant closer Are you now under the influence of intoxicating liquor? No D Yes D
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug? No Yes O
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Julian N. Blackard	8. Full name of father Woble & - Bourn
Residence of father (if deceased so state) The port Richey Florible	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother	9. Full maiden name of mother Auth ann Markey
Residence of mother (if deceased so state) (no pls Ind).	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Incleana	Birthplace of mother (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.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
X Bighan & Blackard	Daniela & Barrey
New Address R R & BOX 298 Indianapolis	New Address RR 8 Box 298 Prople
Subscribed and sworn to before me this	
HENDRICKS	Subscribed and sworn to before me this day of HENDRICKS Circuit Court
Clerk TETORICKS Circuit Court	Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS ss:	State of Indiana,
ovani, vi	County of HENDRICKS ss:
Signed Father	Signed Father
Signed Mother Subscribed and sworp to before me this	Signed Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me this
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
DENDRICKS County C	ourt by written order issued and filed
155 dance	of a marriage license to the above named parties
Be It Remembered, there was filed in war and The LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the A	has issued by the clerk of the HENDRICKS Circuit Court
Be it further remembered the CN	authorizing the joining together as husband and wife
I was filed in my	office, to-wit:
one thousand nine hundred and 8	hereby certify that on the 28 day of Mouse
State of Indiana, Groom Richard & Blackand	at County of Hend
and, Bride Tamela See Rowley	hereby certify that on the 38 day of March at Samuelo , County of Hend County, State of
and the state of a marriage licenses	County State of
Dated this day of Touch, 198	HENDRICKS
, 19	Signed
Filed and recorded in accordance with the laws of the State	Signed C, Mourel Official Designation days
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed Mary Jone Russell Clerk
	HENDRICKS Circuit Cour

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

No	10	3
File		

PICINDRIC	County Man 17 1841
MALE	Date of Application
Medical Examination Report Dated	FEMALE
Name of Physician J. Momas Vierra	Medical Examination Report Dated 3-7-8/
	Name of Physician / homas 7/11/2
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a ligono to many l
MALE APPLICANT	Il and the list to marry by any false statement, representation or pretense
Name First Middle Last	FEMALE APPLICANT
Tickee Dee Vorkage 1	Name First Middle / Last
Date of Birth	Date of Birth Mopth Day Mules
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Shed
At Chattaville Xpid. In	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	mornost Morenelle In.
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married G OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	out (openy)
If answer is "yes", has the adjudication been removed? No Ves	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes No Yes
2. Are you afflicted with a transmissible disease? No Ves U	2 Are your office of the
3. Are you related to the female applicant closer than second cousin?	2 4
4. Are you now under the influence of intoxicating liquor? No Yes O	
5. Are you now under the influence of a narcotic drug? No Yes O	
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.
	to any dependent children.
	R.D.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes	dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their apport.	compliance with any court order or orders issued for their support.
8. Full name of father Schland flow Strucker	8. Full name of father fall tobert Shular
Residence of father (if deceased so state) Wikneum	Residence of father (if deceased so state) Same
Birthplace of father (State or foreign country)	
birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Collect Alle	9. Full maiden name of mother Wouls January Volland
Residence of mother (if deceased so state) Challegyelle, In	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	
State of Indiana	Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given
County of HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS 88: I depose and state the information given in this application is true and correct.
P.A. MI	220
Signed tulle Seulam	Signed A orles duly
New Address CK/ Coalesull Line	New Address RR / Coatesville In
Subscribed and sworm to before me this 17 day of Man 1981.	/Subscribed and sworn to before me this day of
Maria I a de al menore	Subscribed and sworn to before my this day of HENDRICKS
Many And Hendricks Circuit Court	I will fave Usall Clerk TELORICAS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana
County of HENDRICKS ss:	State of Indiana, HENDRICKS Ss:
Signed Father	SignedFather
Signed Mother	Signed
	Subscribed and sworn to before me thisday of, 19,
Subscribed and sworn to before me this	Subscribed and sworn to select the
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS CONTROL OF COUR	ourt by written order issued
County Co	urt by written order issued
authorizes and directs the issuance o	f a marriage license to the above named partial
THE WARDINGS LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
of Indiana dated the day of day of	, 19. , authorizing the joining together as husbana and wife
The state of the s	nd
Be it further remembered, the following marriage certificate was filed in my o	fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of the state of the	hereby certify that on the
one thousand nine hundred and	at
one thousand nine hundred and State of Indiana, Groom	of County, State of
and, Bride See Son And See Son	County, State of HENDRICKS
and, Bride See 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
County.	
Dated this 1981	Carried green
Dated this day of Massel , 1981	
	Official Designation , 1981
Filed and recorded in accordance with the laws of the State of Indiana this	all day of Russell Clerk

APPLICATION FOR MARRIAGE LICENSE

3-18-81 Date of Application

..... Circuit Court

HENDRICKS

Form Prescribed By	MARRIAGE LICENSE File 42
Indiana State Board of Health under Authority of I.C. 31-13-2 Effective July 1, 1977	CKS County Date of Application
	FEMALE Singlish Report Dated 3-2-81
MALE Medical Examination Report Dated 3-25-8/	Medical Examination Report
	Name of Physician Spanding
ALL OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—W	hoever procures the issuance of a license to marry by any false statement, representation or pre-
shall be fined in any sum not exceeding five hands	PERADE ALLEGATI
Name First Middle Last	Name First Middle Last
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth State on theight country),	Place of Birth (State or foreign country)
South Bend, Undiana County State	Residence Address Street or R. R. City County State
Box 127 Plainfield Hendrials Indiana	
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	A Other (Specify) D. Rive Social Security
Other (Specify) I / C I) No W Yes	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? Note Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No expression 1 festivation been removed? No Expression 1 festivation been removed?	If answer is "yes", has the adjudication been removed."
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No 7
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin' No
4. Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes No Yes	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No. 2.
 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 	6. List the full names of any dependent children.
	for Caicoff Calopula
	Soft Engine Cox
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes	dependent children" No 🗆 3
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you compliance with any court order or orders issued for their support.
3. Full name of father William Furguson	8. Full name of father Delicano Q. Cox
Residence of father (if deceased so state) Jefus	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) unly were	Birthplace of father (State or foreign country)
Full maiden name of mother Barbara Jayce Ford	9. Full maiden name of mother Soul See House
Residence of mother (if deceased so state) Deceased	Residence of mother (if deceased so state) Sol E 10th Milawallo 1
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana,
Signed Scott Ford	County of TIENDRICKS In this application is true and cor
	Signed & Tammy S. Cox
New Address	New Address 608E 13that Not 20
Mary Jone Russell Clerk HENDRICKS Circuit Court	Subscribed and sworn to before me this 18 day of Morch 19. May Jane Russell Gerk HENDRICKS Circuit C
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one pa
igns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	the other parent unnecessary
State of Indiana, County of HENDRICKS ss:	State of Indiana,
Signed Father	County of HENDRICKS
Signed	Signed Fat
ubscribed and sworn to before me this	Signed Mo
Clerk	Subscribed and sworn to before me this day of 19.
HENDRICKS County	RT. A marriage license having been refused to the above named parties, ourt by written order issued
n	RT. A marriage license having been refused to the above named parties, ourt by written order issuedand f
Dromann	o to the above power
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e it further remain.	nse issued by the clerk of the HENDRICKS Circuit Co
the fallowing marriage certificate was filed in my	and
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tate of Indiana, Groom	office, to-wit: hereby certify that on the day of
id, Bride	of County of
ounty.	County, State of
ated thisday of, 19,	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	oreal court of
iled and recorded in accordance with the	Signed Official Designation
iled and recorded in accordance with the laws of the State of Indiana this	Official Designation day of
Mana Marrors Additional I	Signed 19

Signed.....

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

105

... Circuit Court

MALE Medical Examination Report Dated 3~13~8/	County
Medical Examination Report Dated	FEMALE Date of Application
Name of Physician Suple C. Kulin	Medical Examination Report Dated 3-13-8/
1 1 I I I I I I I I I I I I I I I I I I	
ALL QUESTIONS MUST BE ANSWERED, L.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (8500.00)". MALE APPLICANT	ever procures the issuance of a li
MALE APPLICANT	If the issuance of a license to marry by any false statement, representation or pretense
Name First Middle U Last	FEMALE APPLICANT
Dete of Birth Month Day	Name Con all H Middle 1) At last
Place of Birth (State or foreign country)	Date of Birth Day Veget
Place of Birth (State of Isoliana Indiana	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Proide Malana
he the second	- Pl Coaste sulle & hindrich Contry State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of office vertice by	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind?	A Other (Specify) Drivers beine W picture
If answer is "yes", has the adjudication been removed? No□ Yes□	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease? No Yes	2 4
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No. Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
	THE PERSON NAMED TO BE ADDRESS OF THE PARTY
7. Are you required by any court order or orders to support the above	7. Are you required by any south of the same of the sa
dependent children? No Yes Vesses is "ness" it is necessited that this Application has been seen as a second of the second of	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Full name of father (1904)	compliance with any court order or orders issued for heir support.
(x a 2 B (1 2 = PA = 0 A	8. Full name of father Marvin Kelinson
Residence of father (if deceased so state) [2 Not 153 Clayton Uno),	Residence of father (if deceased so state) ff / Contequille; Indiana
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother to land Ruth Attle	9. Full maiden name of mother Layle O-Hair
Residence of mother (if deceased so state) QQML	1 Dans
	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Maliana
County of HENDRICKS ss: I depose and state the information given this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
2000	Which Hy Dunia
Signed	Signed Contact S. 100000000
New Address Underson	New Address unknown
ubscribed and sworn to before me this 18 day of MOUCA , 195/.	Subscribed and sworn to before me this day of 1/Ouch 1981.
Mary Jane Russell Clerk HENDRICKS Circuit Court	Mary Jan Russell Clerk HENDRICKS Circuit Court
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
e, 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
gns, 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, HENDRICKS Security of
	ILLAURICKO
LIEVIDDICKS SOL	County of
ounty of HENDRICKS ss:	County of Signed Father
Signed	
Signed Signed Mother	Signed Father Signed Mother
Signed Signed Mother	Signed Father
Signed Signed Mother	Signed Father Signed Mother
Signed Father Signed Mother Obscribed and sworn to before me this day of 19	Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed Father Signed Mother Obscribed and sworn to before me this day of 19	Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed Father Signed Mother abscribed and sworn to before me this day of 19	Signed
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Signed Father Signed Mother abscribed and sworn to before me this day of PENDRICKS OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County C	Signed
Signed Father Signed Mother abscribed and sworn to before me this day of PENDRICKS OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County C	Signed
Signed Signed Mother Signed Mother abscribed and sworn to before me this day of PENDRICKS COUNTY HENDRICKS County County County County Be It Remembered, there was filed in my office a marriage licens Indiana dated the day of County Co	Signed
Signed Signed Mother Signed Mother abscribed and sworn to before me this day of 19 Clerk OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County Count	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the 19 Circuit Court issued by the 1
Signed Signed Mother Signed Mother abscribed and sworn to before me this day of 19 Clerk OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County Count	Signed Mother Subscribed and sworn to before me this day of
Signed Father Signed Mother Abscribed and sworn to before me this day of 19 Clerk OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County Co	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the joining together as husband and wife the standard of the standard in the standard of the control of of t
Signed Father Signed Mother abscribed and sworn to before me this day of 19 Clerk OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Co	Signed Mother Subscribed and sworn to before me this day of 19. Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the joining together as husband and wife ince, to-wit: ereby certify that on the day of County of County, State of County of County of County, State of County of County of County, State of County of County of County of County of County, State of County
Signed Father Signed Mother Abscribed and sworn to before me this day of 19 Clerk OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County Cou	Signed
Signed Father Signed Mother Abscribed and sworn to before me this day of 19 Clerk Complete IF Marriage License Issued by Order Of Court Hendricks County Court authorizes and directs the issuance of authorizes and directs the issuance of Indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the issuance of the indiana dated the day of Authorizes and directs the indiana dated the day of Authorizes and directs the ind	Signed
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Signed Father Signed Mother Abscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE Indiana dated the day of policy and the following marriage certificate was filed in my office a marriage license if further remembered, the following marriage certificate was filed in my office at marriage license in the state of Indiana, Groom had been dead of the state of Indiana, Groom and Ind	Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is issued by the clerk of the 19 Mathorizing the joining together as husband and wife in the importance of the 19 Mathorizing the joining together as husband and wife in the importance of the 19 Mathorizing the joining together as husband and wife in the importance of the importance of the county, State of the County, State of the County, State of the County, State of the County of the Coun

Form Prescribed By Indiana State Board of

Health under Authority

Effective July 1, 1977

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STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

FEMALE

106

Date of Application

Medical Examination Report Dated. Medical Examination Report Dated 3-13-8/ Name of Physician ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretens shall be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT Last Date of Birth Date of Birth 1950 Place of Birth (State or Place of Birth (State 3655 N Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D Previous Marital Status: Never Married OR Date of birth verified by: Birth Certificate UJudicial Decree Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound mind No Yes No D Yes D 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed No Yes No & Yes D Are you afflicted with a transmissible disease If answer is "yes", has the adjudication been removed? No Yes No Ves D Are you related to the male applicant closer than second cousin 2. Are you afflicted with a transmissible disease? No Yes No Yes D Are you now under the influence of intoxicating liquor Are you related to the female applicant closer than second cousin No Yes 4. Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug No Yes 6. List the full names of any dependent children 5. Are you now under the influence of a narcotic drug? ssie allan 6. List the full names of any dependent children nucole 6 Are you required by any court order or orders to support the above No Yes D 7. Are you required by any court order or orders to support the above No T Yes dependent children? dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any courtforder or orders Residence of father (if deceased so state) Residence of mother (if deceased so state). Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) I depose and state the information given in this application is true and correct. State of Indiana, State of Indiana, **HENDRICKS** New Address 3655 N. 1000 HENDRICKS Jane Kussel 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 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... signs, state facts which render the consent of the other parent unnecessary... State of Indiana, State of Indiana, **HENDRICKS** County of .. HENDRICKS County of Signed. Mother Mother Subscribed and sworn to before me this. Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKSCounty...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 .. Circuit Court HENDRICKS of Indiana dated the. , 19 S, 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 one thousand nine hundred and S Drownstang State of Indiana, Groom Tech-..... County of. Kathaine & MorganCounty, 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. Filed and recorded in accordance with the laws of the State of Indiana this.... Official Designation.

day of

Circuit Court

....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 Health under Authority of LC 31-1-32 Effective July 1 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

3-19-81

3-13-81 MALE Medical Examination Report Dated. Date of Application FEMALE Medical Examination Report Dated Name of Physician_ ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense Name of Physician FEMALE APPLICANT Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D Date of birth verified by: Birth Certificate U Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound mind? 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed 2. Are you afflicted with a transmissible disease 2. Are you afflicted with a transmissible disease 3. Are you related to the female applicant closer than second cou 3. Are you related to the male applicant closer than second cousin List the full names of any dependent children Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No Tyes red that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in South Post Birthplace of mother (State or foreign cou State of Indiana,
HENDRICKS State of Indiana. 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of County of .. Signed. Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCourt by written order issued..... 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...... , 19. ..., authorizing the joining together as husband and wife of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the day of Mosel one thousand nine hundred and State of Indiana, Groom Richard and, Bride County, State of Lind HENDRICI 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. Official Designation ...

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

3-19-81 Date of Application

WALE		FEMALE Medical Examination Report	Dated	13.
MALE Medical Examination Report Dated 3-18-8 Name of Physician Willow ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whose part examples of the hundred dollars (\$500,00)".		Name of Physician Sendosa		
shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT		FEMAL	E APPLICANT Middle	Last
Name First Middle	Plast	Slanner	Day	Soundari
Date of Birth Month Day Y	ear ear	Date of Birth Month	Pay	(o D
8 29	let	Place of Birth (State or foreign country))	
Place of Birth (State or foreign country)	State .	Residence Address Street or R. F.		County C State
Residence Address Street or R. R. City County	State,	3 Hugher Fash K	was Nous	Durg Did.
ALLO II PETITO IN COURSE I POSSESSION		Previous Marital Status: Never Married	OR	0
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce	□ Annulment □	
Date of birth verified by: Birth Certificate U Judicial Decree		Date of birth verified by: Birth Certificate	☐ Judicial Decree	
5 To 1 To				
Other(Specify)	h C	Other (Specify) 1. Are you now or have you ever been adjudged	d to be of unsound mind?	No ♥ Yes □
1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes O	If answer is "yes", has the adjudication been		No□ Yes□
If answer is "yes", has the adjudication been removed?	No W Yes	Are you afflicted with a transmissible disease		No ♥ Yes □
2. Are you afflicted with a transmissible disease?	No 1 Yes □	3. Are you related to the male applicant closer		No ₩ Yes C
Are you related to the female applicant closer than second cousin? Are you now under the influence of intoxicating liquor?	No ¥ Yes□	4. Are you now under the influence of intoxica		No Yes C
Are you now under the influence of a narcotic drug?	No D Yes □	5. Are you now under the influence of a narcot		No ♥ Yes □
List the full names of any dependent children.		6. List the full names of any dependent childre		
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The state of the s				
Are you required by any court order or orders to support the above dependent children?	No □ Yes □	Are you required by any court order or orde dependent children?	rs to support the above	No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory		If answer is "yes", it is required that this App	olication be accompanied by se	
compliance with any court order or orders issued for their support.		compliance with any court order or orders is		
Full name of father Roberts a. Roberts		8. Full name of father Perry Sambers . J.		
Residence of father (if deceased so state)		Residence of father (if deceased so state)	granding ?	L.C
Birthplace of father (State or foreign country)			00	
6 88.		Birthplace of father (State or foreign country)	1	
Full maiden name of mother Some W. ofenu	100	9. Full maiden name of mother Demo	da S. H.	Labray
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	Samo	9 0
Birthplace of mother (State or foreign country) Jaw Ham Dl	is	Birthplace of mother (State or foreign country	00.	
State of Indiana		State of Indiana,		na
HENDRICKS ss: I depose and state the in this application is t	rye and correct.	County of HENDRICKS	ss: I depose and st	tate the information given ation is true and correct
Signed X Kussell & Kahr	3	19	have and	Donne das
	<i>F/1</i>	Signed	1 MUNROY X	Sayrow
New Address Leaders & Control of the	V 74.	New Address Hay	407 Doy 25	1 Fort /11400
ubscribed and sworn to before me this day of Mase	1984	Subscribed and sworn to before me this	19 day of Ma	18 91 22
Mongane Russell Gerk HENDRICKS	Circuit Court	Mary Jone Russ	W	DDICKS
101		ford bone, no	Clerk HENI	DRICKS Circuit Court
ONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR	CUARDIAN	
Ve, the parents, of this applicant hereby give consent for this marriage. If	only one parent			
gns, state facts which render the consent of the other parent unnecessary		We, the parents, of this applicant hereby		
parent unnecessary	***************************************	signs, state facts which render the consen	t of the other parent un	necessary
	***************************************			***

				15 mi
ate of Indiana, HENDRICKS ss:		State of I-3'		
unty of HENDRICKS } **:	26	State of Indiana, County of HENDRICKS	ss:	
Signed	Davis	- Driero	.)	
Signed	Father	Signed		Father
	Mother	Signed		Mother
scribed and sworn to before me thisday of	, 19			
		Subscribed and sworn to before me this	day of	, 19
				Clerk
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORD HENDRICKS County Supply	ER OF COURT	. A marriage license having have		tho the
Hend Clerk Olive and		a marriage license having been in the written order issued.	refused to the above	e named parties, the
Hend Clark's Office authorizes and direct RETURN OF MARK	ts the issuance of	a marriage license to the above no	ar course	and filed
Russ OD O Ray day of M/s	Asc	to El	HENDRICKS	Circuit Court
e it further remembered, the following marriage certificate	an	d authorizing th	he joining together of	as husband and wife
day of	as filed in my off	fice, to-wit:	anders	***************************************
tate of Indiana, Groom And Bride Survey of the following marriage certificate under the thousand nine hundred and the following marriage as authorized by a marriage lice of the following marriage is a suthorized by a marriage lice of the following marriage is a suthorized by a marriage lice of the following marriage is a suthorized by a marriage lice of the following marriage is a suthorized by a marriage lice of the following marriage is a suthorized by a marriage lice of the following marriage certificate under the following marriage as a suthorized by a marriage lice of the following marriage under the followin	h	ereby certify that on the		
tate of Indiana, Groom Russian Q. Q. R. J.	a	t Browns	day of \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	de de la companya della companya della companya de la companya della companya del
nd. Bride Shannon, X	0	f House a fill the	, County of	1 June 1
ere by me united in marriage as authorized by a marriage licounty.	of	lease lucal	County, State of	Jeodro D.
ounty.	ense issued for th	hat purpose has the co	.County, State of	Hand Wid,
ere by me united in marriage as authorized by a marriage licounty. ated this day of Marriage		the Clerk of the Circum	it Court of	HENDRICKS
		a: C		
led and recorded in accordance		Signed Steph of Manager of Manage	D. Wleen	>
th accordance with the laws of the State of	Indiana this	gueral Designation.	ester	
STATES.				
iled and recorded in accordance with the laws of the State of		Signed Many Jane R	00	, 19
		J. Jones Williams	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	(10011)
			HENDRICK	KS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

MALE	County 3-20-81
Medical Examination Report Dated $\sim -24-81$	FEMALE Medical P
Name of Physician Ludmila Trammel	Medical Examination Report Dated 2-248
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Wh	Name of Physician Luclmila Transmel
MALE APPLICANT	over-procures the issuance of a license to marry by any false statement, representation or pretense
Name Eirst Middle	FEMALE APPLICANT
Date of Birth Month Day Year	First & Middle O D Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address Street or A. R. City Court	Place of Birth (State or foreign country)
39 Dawn Dr. B burg Kend In	Residence Address Street or R. R. (Gity Sounty) State)
Previous Marital Status: Never Married OR	39 Daws M. Bourg New Sno.
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers License / picture	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No Yes No Yes
3. Are you related to the female applicant closer than second cousin? No Yes No Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin? No Yes 4. Are you pow under the influence of the country of the countr
5. Are you now under the influence of a narcotic drug? No Yes No Yes	4. Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug? No Yes Ves
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court ofder or orders issued for their support.	compliance with any court order or orders issued for their support.
La to the	8. Full name of father Saired W. Engel
Residence of father (if deceased so state) Partion Section Section 100 100 .	Residence of father (if deceased so state) Brownsburg Incl
Birthplace of father (State or foreign country) attempted Illinois	Birthplace of father (State or foreign country) South Nata
9. Full maiden name of mother Chelle Cleb Cleb	9. Full maiden name of mother Rebecca From M. Fletcher
Residence of mother (if deceased so state) Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Brownshung, Ind.
Birthplace of mother (State or foreign country) State of Indiana,	Birthplace of mother (State or foreign country) Mennesota
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
Server Dela	VO2 1 S & 0
New Address & makawk apartments	Signed Signed Control
21 Mula	New Address Sould (Carlot Carlot St. March St.
Make by Remain HENDRICKS	Subscribed and sworn to before me this. All HENDRICKS
(LOUI) Glerk HEINDRICKS Circuit Court	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 parent	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	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana.	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
ounty of HENDRICKS ss:	County of
Signed Father	SignedFather
Signed	Signed
ubscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
Clerk	Clerk
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS	r. A marriage license naving been refused to the above named parties, the
County County County	and filed a marriage license to the above named parties.
authorizes and directs the issuance of	AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licens	an account has the ciert of the
an an	ed James
at further remembered, the following marriage certificate was filed in my of the following marriage ce	ereby certify that on the day of Spil
C. M. Blass	County of Land
ate of Indiana, Groom Call O Cline	County, State of County
d, Bride of Indiana, Groom Call O Company of	County, State of HENDRICKS
tre by me united:	hat purpose by the Clerk of the Circuit Court of
unty. day of	Cioned Welliam C. Mellow
day of , 19	Signed Winds In
lot .	Official Designation , 1981.
led and recorded in accordance with the laws of the State of Indiana this	Mar Va a Meredania
	Signed HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

3-20-81 Date of Application

.... Circuit Court

Effective July 1, 1977	
- 12 2/	FEMALE Medical Examination Report Dated
MALE Medical Examination Report Dated 3-19-81	
	Name of Physician
Name of Physician	ever procures the issuance of a license to marry by any false statement, representation or pretense ever procures the issuance of a license to marry by any false statement, representation or pretense ever procures the issuance of a license to marry by any false statement, representation or pretense ever procures the issuance of a license to marry by any false statement, representation or pretense ever procures the issuance of a license to marry by any false statement, representation or pretense ever procures the issuance of a license to marry by any false statement.
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed. False states shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Prost Midfile A fast -
Name Firsty Mindle Wather	Jama - Casuglion
Day Year	Date of Birth Month 26 1950
Pare of Birth 7951	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	RRI Box 324 Claylon Herd In
RRI BOX 164A Light	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Drive for a Worth
Other (Specify) Drivers Licenso "picture	Other (Specify) Williams Sicilians pulled
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No Vest
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No Vest
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No 2 Yes
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Vest
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Eric Lee Wathen	Richard M. Castiglion Jr.
matthew Ma 11/2th	anthony W. Cantralion
I will wan warnen	
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children? No Yest
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders, issued for their support.	compliance with any court order of orders issued for their support.
8. Full name of father Robert A. Wather	8. Full name of father Conald & Parsons
Residence of father (if deceased so state) Liston Ind.	Residence of father (if decreased existed Alexander)
P. t. V.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Cona Newson	9. Full maiden name of mother Ruth IIIal York
Residence of mother (if deceased so state) Lighton Ind	Residence of mother (if deceased so state) Contesselle had
Birthplace of mother (State or foreign country) Indiana	1/2 1 3 60
State of Indiana	Birthplace of mother (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.	County of HENDRICKS Bas: I depose and state the information give in this application is true and correct
I for I with	Land Balling
Signed A TUMAS OF CONTRACTOR	Signed Laura J. Castiglione
New Address 1 7 DOX 69 H Sylveyn	New Address LRI # 164 A Liston
Subscribed and sworn to before me this day of Jack Ch. 19	Subscribed and sworn to before me this 20 day of Darch 1987
Welary Jane Kusse Clock HENDRICKS Circuit Court	Mary Jase Russelford HENDRICKS Circuit Cour
The court	Circuit Cour
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 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 paren
parent differences at y	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS
SignedFather	County of TENDRICKS
	SignedFathe
Signed	Signed
Subscribed and sworn to before me thisday of, 19	
Clerk	Subscribed and sworn to before me this day of 19
	Cler
HENDRICKS 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 and filed
authorizes and directs the issuance o	of a marriage li
DEMILIPA	and the second the above named parties
of Indiana dated theday ofday of	E AND MARRIAGE CERTIFICATE
Pait tuetles and I water	, 19 . authorizing the joining together as hychard and wife
I bennes I be a fired in my o	thice to with
one thousand nine hundred and \$\frac{1}{2}	hereby certify 1
	day of
and Bride James & Nother	of How Country of Heavy
were by me united in manie of	How I County, State of Jan
were by me united in marriage as authorized by a marriage license issued for Dated this. day of	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of March 1981	order Court of
Filed and recorded in accordance with the laws of the State	Signed Device of Dodsen
state of Indiana this	Official Designation Waster
Filed and recorded in accordance with the laws of the State of Indiana this	Signed 19 01
	The state of the s
	HENDRICKS Circuit Cour

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

42 File__ 3-20-81

Date of Application

MALE Medical Examination Report Dated 3-/3-8/	FEMALE Date of Application			
Name of Physician Carl & Heinlein	Medical Examination Report Dated 3-13-8/			
	Name of Physician (Och & Neanlein			
	ver procures the issuance of a license to marry by any false statement, representation or pretense			
MALE APPLICANT First Middle	FEMALE APPLICANT			
Name Sheman Dowell Williams	Name Crist Middle Last			
Date of Birth	Date of Birth Month Day Year			
Place of Birth (State of foreign country)	Place of Birth (State of foreign country)			
Residence Address Street or R. R. Gity County State	Residence Address Street or R. R. City County State			
Previous Marital Status: Never Married OR	RKG Box GZ Donvills and			
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment			
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree			
M Other (Specify) Drule's lainse W/ Prottere				
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes Other (Specify)			
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?			
2. Are you afflicted with a transmissible disease? No. Yes	2. Are you afflicted with a transmissible disease?			
3. Are you related to the female applicant closer than second cousin? No ♥ Yes □ 4. Are you now under the influence of intoxicating liquor? No ♥ Yes □	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes			
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No ✓ Yes ✓ No ✓ Yes ✓ No ✓ Yes ✓			
6. List the full names of any dependent children.	6. List the full names of any dependent children.			
	是这些人的意思不是情况的是是是一切! 医电影流流 医神经神经病			
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above			
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No□ Yes□ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in			
compliance with any couft order or orders issued for their support.	compliance with any coup order or orders issued for their support.			
8. Full name of father Simon Leonge Williams	8. Full name of father Joseph Mornier			
Residence of father (if deceased so state)	Residence of father (if deceased so state) oloclossed			
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Russia			
9. Full maiden name of mother Dais Trimes	9. Full maiden name of mother Mong Cesnils			
Residence of mother (if deceased so state) Qlclasta	Residence of mother (if deceased so state) deceased			
Birthplace of mother (State or fore in country) Ohio	Birthplace of mother (State or foreign country) Polonia			
State of Indiana, I depose and state the information given	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.			
County of HENDRICKS Sa: in this application is true and correct.	County of			
Stymbre Willems	Signed Parling			
New Address VR. le Ozox 62	New Address. R 6 20162 - Nontice			
Subscribed and sworn to before me this 20 day of Yhouch 1981.	Subscribed and sworn to before me this day of HENDRICKS Circuit Court			
Mary an Cussell Clerk HENDRICKS Circuit Court	Mon fore fulfself Clerk HENDRICKS 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 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			
signs, state facts which render the consent of the other parent unnecessary	signs, state facts with			
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS County of			
Sound, of	Signed Father			
Signed Father	Signed			
Signed Mother	Subscribed and sworn to before me this			
Subscribed and sworn to before me thisday of, 19	Clerk			
Clerk	to the shove named parties, the			
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the			
HENDRICKS County	RT. A marriage license having been reader and filed Court by written order issued			
DETURN OF MARRIAGE LICEN	SE AND MILITARY CITCUIT COURT			
Be It Remembered, there was filed in my office a marriage lice	, 19.31, authorizing the joining together as husband and wife			
of Indiana dated the day of day	political in the second			
Boit to the Branch of the Bran	office, to-wit:			
1, Mary Jane Research	at County of Hand			
one thousand nine hundred and S	at County State of County State of County State of			
State of Indiana Groom	Light			
were by				
acre by me united in marriage as authorized by a murriage				
Dated this day of March, 19.	Signed Mary Jane Russell			
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation 1981			
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Circuit Court			
	Literate Court			

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	112
File_	42
	3.20.81
	Date of Application

Effective July 1, 1977	FEMALE 3-13-81
MALE Medical Examination Report Dated 3-17-81	Medical Examination Report Dated
	Name of Physician Across
Name of Physician 1. 31-1-3-6 prescribed "False statement - V	Whoever procures the issuance of a license to marry by any false statement, representation or preto
shall be fined in any sum not exceeding the number distribution	FEMALE AFFLICANT
MALE APPLICANT Name First Middle Last	Name First Middle Pays O.
Discould Day Year	Date of Birth Molyh 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
9925 Madallan Ba. Judges.	KNA CA
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married A OR Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate - Judicial Becree	
Other (Specify)	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No ■ Y
I. Are you now or have you ever been adjudged to be of unsound mind? No ♥ Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □	
2. Are you afflicted with a transmissible disease?	
3. Are you related to the female applicant closer than second cousin?	
4. Are you now under the influence of intoxicating liquor? No ✓ Yes □ No ✓ Yes □ No ✓ Yes □	
 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 	6. List the full names of any dependent children.
. 7	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No ☐ Yes ☐ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No P Ye
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are compliance with any court order or orders issued for their support.
8. Full name of father Richard & Bange	8. Full name of father Que Payee
Residence of father (if deceased so state)	Residence of father (if deceased so state) Samille Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Delice J. Fullow	9. Full maiden name of mother Sulviva & Yardraugh
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	
State of Indiana,	Birthplace of mother (State or foreign country)
1. 2	County of HENDRICKS as: I depose and state the information gives in this application is true and corre
Signed Mar & Beng Q	Signed & Mary E. Payne
New Address 79.25 NOF DW41100 DR	New Address RR. 2 Box 88A Danvie
Subscribed and sworn to before me this. 20 day of March 1981.	Subscribed and sworn to before me this 20 day of March, 18.3
Many Jone Russel Clerk HENDRICKS Circuit Court	Horse Mary Jone Russ Dork HENDRICKS Circuit Con
CONSENT OF PARENTS, PARENT OR GUARDIAN	The state of the s
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	CONSENT OF PARENTS, PARENT OR GUARDIAN
igns, state facts which render the consent of the other parent unnecessary	We, the parents, of this applicant hereby give consent for this marriage. If only one pare
and other parent unnecessary.	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana,	
county of HENDRICKS ss:	State of Indiana,
SignedFather	County of HENDRICKS
Signed	Signed Fath
ubscribed and sworn to before me this day of 19	Signed Sylvia L. Payre Moth
	Subscribed and sworn to before me this day of 19
Clerk	
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	URT. A marriage license having been refused to the above named parties, the Court by written order is an above named parties, the court by written order is an above named parties.
County	RT. A marriage license having been refused to the above named parties, the Court by written order issued. and file
authorizes and directs the issuance	of a marriage 1
RETURN OF MARRIAGE LICEN	SE AND as
RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN f Indiana dated the day of	ense issued by the clerk of the
e it further remembered the	, 19 0 authorizing the interest and will
Harlan Killed in my	ense issued by the clerk of the HENDRICKS Circuit Cow and Office, to-wit: hereby certify that on the
, weads	bree, to-wit:
tate of Indiana, Groom Marine	office, to-wit: hereby certify that on the at fee forming together as husband and with the office, to-wit: hereby certify that on the at fee forming together as husband and with the office, to-wit: County of Hard
id, Bride	of (), County of
ere by me united in marriage as authorized by a marriage as	County, State of
ated this day of Open 198	hereby certify that on the day of April County of County of County, State of County, State of HENDRICKS
, 19	
iled and recorded in accordance with the laws of the State of Indiana this	Official Designation
	day

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

MALE	Date of Application
Medical Examination Report Dated 3-14-81	FEMALE
Name of Physician Hangard	Medical Examination Report Dated 3-14-81
00	Name of Physician Hoggand
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	pever procures the issuance of a license to marry by any fellowing
MALE APPLICANT	Il and the statement and the statement representation or pretense
Name First , Middle Last	FEMALE APPLICANT
Date of Birth Month Day Year	Name First Middle Last
2	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	1 2 2011
Disensate, and-	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	The a Box 394 alayton, Mid.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: 🖰 Birth Certificate 🗆 Judicial Decree
A Other (Specify) Drusse die of pict	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No □ Yes□
If answer is "yes", has the adjudication been removed? No Ves	If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease? No Yes O	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Ves U	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No PA Yes	4. Are you now under the influence of intoxicating liquor? No № Yes □
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Ralpha E. Martin	compliance with any court order or orders issued for their support.
	8. Full name of father author and arran
Residence of father (if deceased so state) Mangella, Und.	Residence of father (if deceased so state) Sauton Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Sana Mathew	00
2. I all made manie of moties	9. Full maiden name of mother W wto 3.
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
County of HENDRICKS ss: In depose and state the information given in this application is true and correct.	
Signed & Kerry Martin	Signed & Carol Anderson
New Address PP 2 Contaville, IN	New Address PR #2 Box 270 Cooles ville, IN
	New Address
Subscribed and sworn to before me this 20 day of Mash. 1981.	Subscribed and sworn to before me this 20 day of Mosel , 1981
Mary Jone Russell Clerk HENDRICKS Circuit Court	Many Jaco Russell Clerk HENDRICKS 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 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
signs, state facts which render the consent of the other parent unnecessary	Signs, state facts
	Out of Indiana
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS
County of HEINDRICKS	County of
Signed Father	Signed Father
Signed Mother	Signed
	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me this day 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
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	and filed
HENDRICKS - Co	ourt by Written order issued
in authorizes and directs the issuance of	i a marriage nechos to
- i an FIGURO	E AND MARKIAGE CERTIFICATE LIENDDICKS
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
of India	
	nd
Be it further remembered, the following marriage certificate was filed in my o	ffice, to-wit: hereby certify that on the Say of County of County of
1, Charles a Carpenter	hereby certify that on the County of County of
one thousand mine to the total and the thousand mine to the total and th	at the state of the
State of I is	0]
	HAND WALL
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
County.	
Dated this 28 day of Mosch, 1981	Signed Charles a Carpenter
auy oj	om :- 1 Designation
The said the	3 day of Clerk
Files	Clerk Clerk
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

HENDRICKS

County

Date of Application

Effective July 1, 1977	FEMALE Medical Examination Report Dated 3-(3-8)
MALE 3-13-81	
as II a Framination Report Dated	Name of Physician
Name of Physician Secretary Secretar	ver procures the issuance of a license to marry by any talk that the issuance of a license to marry by
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 preserved a shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First & Middle Last Last
Name First Middle Olinger	Date of Birth Month Day Year
Date of Birth Month Day Year	Place of Birth (State or foreign country)
Place of Birth (State or fordign country)	Street of R. City County State
City County State	Residence Address Donnelle Ind.
Residence Address Street or R. R.	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married X OR	Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
Other (Specify)	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes No Yes No Yes No Person	If answer is "yes", has the adjudication been removed" No D Yes C
If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease" No Yes C
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No. Yes
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intexicating liquor? No Yes
5. Are you now under the influence of a narcotic drug?	Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.
6. List the full names of any dependent children.	6. List the full names of any dependent classics.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No□ Yes□
dependent children? No 11 Yes 11 If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Tock C. Olinger	8. Full name of father the state of the stat
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother gradiath g. Poorley	9. Full maiden name of mother. Belly Jean Bury
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Academic of Indicated and Academic of the Acad	01.
Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given	State of Indiana. I depose and state the information give
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	County of HENDRICKS sa: in this application is true and correct
Signed Mark Estura Dugo	Signed Miram E. Doulay
New Address 12 PURPURA DR. DADVILLE	
Subscribed and sworn to before me this 20 day of March, 198)	New Address Subscribed and swown to before me this 30 day of March, 188
MENIDPICKS	
Clerk Circuit Court	They fore Cussellaerk HENDRICKS Circuit Cou
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one paret
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
3	organ, state inch which render the consent of the other parent smitchess.
	The state of the s
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
Signed	County of HENDRICKS
Signed Father	Signed
Subscribed and sworn to before me this	Signed
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me this day of
Clerk	Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COMP	
HENDRICKS County	RT. A marriage license having been refused to the above named parties, the court by written order issued and file
authorizes and directs the issuance	ourt by written order issued and file
DETILIPA OF THE	of a marriage license to the above named parties.
of Indiana dated the day of day of	SE AND MARRIAGE CERTIFICATE the se issued by the clerk of the HENDRICKS Circuit Control of the
Mark & Danch	and 19 1, authorizing the joining together as husband and wi
Be it further remembered, the following marriage certificate and file	and
Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom	office, to-wit:
one thousand nine hundred and 81	nereby certify that on the 3 day of Opul
and Pride	of H. County of Hand
were by me united in the standard of	He County, State of
Country of marriage linears	County State of
were by me united in marriage as authorized by a marriage license issued for Dated this. day of	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19.0	
Filed and recorded in accordance with the	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Marketen
	ady of \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

115

AENDRIC	
MALE Medical Examination Report Dated 3-17-81	FEMALE Date of Application
Name of Physician Joseph C. Kuli	Medical Examination Report Dated 3-17-8/
1 1000	
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT.	ever procures the issuance of a livery
MALE APPLICANT	Il
Name Girst Middle , Last	Name 0 First
Date of Birth Month Day Year	Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Pay
(liamon)	Place of Birth (State or spreign country)
3232 Street of R. R. City Ma County State	Residence Address Sprea or R. R. City County A State
Previous Marital Status: Never Married OR	539 Janley Plainfield Londricks State
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
A Other (Specify) Driver's license W picture	9 Other (Specify) Drivers licenso W/biotrus
1. Are you now or have you ever been adjudged to be of unsound mind?	10000
If answer is "yes", has the adjudication been removed? No□ Yes□	
2. Are you afflicted with a transmissible disease?	11 answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? No Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No X Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
Pamela 17	6. List the full names of any dependent children.
- work	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No □ Yes □	dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father William Fetton Strison	compliance with any court order or orders issued for their support.
()/0000	8. Full name of father Taymond Maried Going
Residence of father (if deceased so state)	Residence of father (if deceased so state) Vlounfield, Surclination
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Kentucley
9. Full maiden name of mother Oppur Whatted	9. Full maiden name of mother Georgie Wallace
Residence of mother (if deceased so state) Ole 1000	0 0000
7/100	Nesidence of models in deceased so state.
Birthplace of mother (State or foreign country) State of Indiana,	Birthplace of mother (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.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
well of t.	v 21
Signed & Tough Z	Signed Alleneviere Murphy
New Address 539 Hauley, Flainfield	New Address 539 Hanley Planaticle
Subscribed and sworn to before me this 26 day of // Much 1981.	Subscribed and sworn to before me this day of day of 10000, 76.81
Way are Kussell Clerk HENDRICKS Circuit Court	Mary Jane Kussell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of
Signed Father	SignedFather
Signed Mother	Signed
	Subscribed and sworn to before me thisday of, 19,
Subscribed and sworn to before me this day of , 19	Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	Γ. A marriage license having been refused to the above named parties, the
HENDRICKS Co.	art by written order issued
in	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSI	AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSE	Se issued by the clerk of the HENDRICKS 19 8/, authorizing the joining together as husband and wife
of Indiana late to the contemporary there was filed in my office a marriage trees.	se issued by the clerk of the solution together as husband and wife
of Indiana dated the 35th day of March. Be it further remembered, the following marriage certificate was filed in my of the control of the c	Jenemen y Mary M countries & bo
Be it further remembered, the following marriage certificate was filed in my o	fice, to-wit:
The state of the s	
one thousand nine hundred and	county State of Ind
one thousand nine hundred and State of Indiana, Groom Lands Earl Stinson	County State of Ind
State of Indiana, Groom Claude Fail Student	HENDRICKS HENDRICKS
were by me united in marriage as authorized by a marriage license issued for	hat purpose by the Clerk of the Circuit Court of
	2 222
Dated this day of Ophil , 1981	Signed Jaymon & Water
	Signed Jay Wholeness Spagne.
Filed and recorded in accordance with the laws of the State of Indiana this	23 day of Springer, 10
and recorded in accordance with the laws of the State of Indiana the	Signed Mary Jan 2 Russell Clerk HENDRICKS Circuit Court
	Control Court

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STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE 3-23-81 Date of Application

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 APPLICATION FOR M. HENDRICKS	S County Date of Application
Effective July 1, 1977	FEMALE Medical Examination Report Dated 3-12-81
MALE Medical Examination Report Dated 3 1 - 8	e Physician dayall
Name of Physician would would be returned whose	Name of Physician. ver procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name First Middle	Date of Birth Month Day Year
Date of Birth Month Day	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	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Ended By Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Other (Specify) Down Sie Wheat.
Other (Specify) Surers to be of unsquired mind? No I Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No 12 Yes U
1. Are you now or have you ever been adjudged to be of allowing the same and the sa	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed? No Ves 2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No ☐ Yes ☐ 3. Are you related to the male applicant closer than second cousin? No ☐ Yes ☐
No Yes	Are you now under the influence of intoxicating liquor? No Yes Ves Ves
4. Are you now under the influence of intoxicating liquor? No Yes No Yes Yes	5. Are you now under the influence of a narcotic drug? No Yes D
Are you now under the influence of a narcotic drug? List the full names of any dependent children.	6. List the full names of any dependent children.
u. Mas the tun hames of any dependent controls.	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Language 7. Sutherlin	8. Full name of father
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Sally . Hall	9. Full maiden name of mother Evelyn M Wykow
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana. HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.
County of	County or
Signed & bullerans R The line	Signed Charles Comproser
New Address 18 Extlan Ct Refal	New Address 2 2
Subscribed and sworn to before me this 3 day of 1981	Subscribed and sworn to before me this 33 day of Malala 1951
Clerk HENDRICKS Circuit Court	Mary Jano Rest Correct 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, HENDRICKS } ss:	State of Indiana,
County of County	County of HENDRICKS ss:
Signed Father	SignedFathe
Signed Mother	SignedMothe
Subscribed and sworn to before me this day of , 19	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 court by written order issued and file
authorizes and directs the issuance	of a marriage license to the above named parties
RETURN OF MADDIACE TYCES	
Be It Remembered, there was filed in my office a marriage lice	ense issued by the clerk of the HENDRICKS Circuit Cour
Be it further remembered, the following marriage certificate was filed in my	and the following together as husband and will office, to-wit:
	hereby certify that on the
State of Indiana Casam -	
State of Indiana, Groom Delian & State of Indiana, Groom Delian & State of and, Bride Sathan Anna Edwardson of	County State of Ord
and, Bride the Common of were by me united in marriage as authorized by a marriage license issued for County.	County, State of
were by me united in marriage as authorized by a marriage license issued for Dated this day of 19	The Cierk of the Circuit Court of HENDRICKS

Official Designation.

.. Circuit Court

HENDRICKS

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

42 HENDRICKS 3-23-81 _County Date of Application

HENDRICKS

...Circuit Court

MALE	Date of Application
Medical Examination Report Dated 3-21-8	FEMALE Medical Examination Report Dated 3-21-81
Name of Physician Haday	
OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "Pol	Name of Physician Hadley
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement-Whoshall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	The state of the s
Name First Middle Last	Name First William
Date of Birth Month Day Year	Paula made 2 Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Ortio	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
tox. and	Box 264 PDA State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
of Other (Specify) Durers his who are	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	A Other (Specify) Durers Sic upper
If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No ▼ Yes □
2. Are you afflicted with a transmissible disease? No TYes I	If answer is "yes", has the adjudication been removed? No □ Yes □
3. Are you related to the female applicant closer than second cousin? No A Yes	2. Are you afflicted with a transmissible disease? No A Yes
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin? No 📮 Yes 🗆
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug? No Yes Yes Yes
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.
Khristopher W. Mclardle	of bist the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No□ Yes□	dependent children? No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Ray (nord) & McCandle	compliance with any court order or orders issued for their support.
8. Full name of father Hay with the first the father than the first the father than the father	8. Full name of father Josephs & Sprage St.
Residence of father (if deceased so state) Kasung Sun Dad	Residence of father (if deceased so state) Sense Houte Ond.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Sana P. Calset	9. Full maiden name of mother Badrasa fr. F Cution
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS Section 1 Section 2 Section 2 Section 2 Section 3 Sectin 3 Section 3 Section 3 Section 3 Section 3 Section 3	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
County of	County of County of
Signed & dist in mi Carth	Signed V. Paula J. Flagar
New Address POB at 264; Plain Field In 4416	New Address 40 LOX IG4 Clauded In4
	Subscribed and sworn to before me this
Subscribed and sworn to before me this day of HENDRICKS	Clerk HENDRICKS Circuit Court
Clerk HENDRICKS Circuit Court	Gerk Gore
	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 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	signs, state facts which render the consent of the other parent unnecessary
•	
State of Indiana,	State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of Father
SignedFather	Signed
Mother	Signed
	Subscribed and sworn to before me thisday of, 19,
Subscribed and sworn to before me thisday of, 19	Clerk
Clerk	Principles of the second secon
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
HENDDICKS	offer by written or doz
County.	of a marriage license to the above named parties.
in authorizes and directs the issuance of	MARRIAGE CERTIFICATE
PETURN OF MARRIAGE LICENS	E AND MARKIAGE CHICAS Circuit Court
Be It Remembered, there was filed in my office a marriage licer	19 %, authorizing the joining together as husband and wife
of Indiana dated the	
11 -1 -10 -10	111111111111111111111111111111111111111
Be it further remembered, the following marriage certificate was filed in my	day of
1, Stephen Malsoky	hereby certify that on the, County of Lond,
one thousand nine build it	County State of
State of Indiana, Groom	County, State of
and, Bride tout & Sugar of	that purpose by the Clerk of the Circuit Court of
County were by me united in marriage as authorized by a marriage license issued for	$\sim m \cdot p$
County. Dated this	1. Signed Supland of Johnson
day of	Signed

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

2-24-%\ Date of Application County

HENDRICKS

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

FEMALE

MALE Medical Examination Report Dated Name of Physician Name of Physician	Name of Physician Report Dates Name of Physician
Name of Physician 10 ANSWERED 10 31-1-3-6 prescribed "False statement—Who	never procures the issuance of a license to marry by any false statement, representation or pretens
shall be fined in any sum not exceeding live numerical	FEMALE ATTEICANT
MALE APPLICANT Name First Middle Last	Name First Middle Last
Barnard & Albertan	Date of Birth Month Day Year
Date of Birth Month Day	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	409 7 HRiley Judge, I.d.
265 Dan Jone Kd. 1 Hg. Did.	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment	Last Marriage Ended By Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: D Birth Certificate Judicial Decree
	Other (Specify)
Other (Specify)	1. Are you now or have you ever been adjudged to be of unsound mind. No Vest
1. Are you now or have you ever been adjudged to be of unsound mind? No 9. 1es □ If answer is "yes", has the adjudication been removed? No □ Yes □	If answer is "yes", has the adjudication been removed. No D Yes
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No 7. Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin" No E Yes
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No W Yes
5. Are you now under the influence of a narcotic drug? No Are you now under the influence of a narcotic drug?	Are you now under the influence of a narcotic drug ⁹ No Yes List the full names of any dependent children.
6. List the full names of any dependent children.	6. List the full names of any dependent condition.
Dand Alleston	
Drana albertson	
westerello utella	
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children No□ Yes!
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children" No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father francisco C. Ollowaton	8. Full name of father Donald O. look
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Marian & Walliam	
Residence of mother (if deceased so state)	9. Full maiden name of mother Caragaset H. Myers
	Residence of mother is deceased so states
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
County of HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS See: I depose and state the information give in this application is true and correct
43 SAL	
New Address 162 DAN JONES REGIONALIZATIONS	signed X Onnie M Cook
	New Address
Subscribed and sworn to before me this 2H day of March, 1981	Subscribed and sworn to before me this 24 day of Massel 1951
Clerk HENDRICKS Circuit Court	Man Jone Russ Oderk HENDRICKS Circuit Cour
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
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
of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS }ss:	State of T. V.
	State of Indiana, County of HENDRICKS
SignedFather	
Signed	Signed Father
Subscribed and sworn to before me this day of 19	Signed Mother
	Subscribed and sworn to before me this day of 19
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage V
in County County	art by written order.
authorizes and directs the issuance of	f a marriage license and filed
RETURN OF MARRIAGE LICENSE	above named parties.
Be It Remembered, there was filed in my office a marriage license of Indiana dated the day of the d	se issued by the clark the clark
Gernard Lee Officet Durch	HENDRICKS Circuit Cour
of Indiana dated the 2 S day of DANCA Be it further remembered, the following marriage certificate was filed in my of the control one thousand nine hundred and the control of the contro	ad
1, Kober Letter Carter was filed in my of	fice, to-wit:
one thousand nine hundred and h	fice, to-wit: dereby certify that on the 29 day of March
State of Indiana, Groom Seward of Olbertage	all Marion
were hu me united in	County State of Jan
one thousand nine hundred and hards have the my of the state of Indiana, Groom was and, Bride of the state of	County State of
Dated this day of March 19	the purpose by the Clerk of the Circuit Court of HENDRICKS
, 19.	

Signed Robert & Carter
Official Designation Market

.... Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

__County

File_

Circuit Court

	County
MALE Medical Examination Report Dated Morch 25 1881	FEMALE Date of Application
Medical Examination Report Dated Morch 35, 1981	Medical Examination Report Dated Man 13 81
Name of Finger	Nome of Division of the state o
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,000".	Thysician Sumara Wilson
shall be fined in any sum not exceeding tive nundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
Name First OMiddle 11 1 Mart	FEMALE APPLICANT
Thomas D. Hilder Chast	Name First Middle Last
Date of Birth Month Day Year 19.59	Date of Birth Month Day
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	
Box (2) Plainfield Hendricks Indian	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	Province Marie Con State of the Province Of th
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Ochar (Specify)	Junical Decree
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Ver	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No ✓ Yes □ 5. Are you now under the influence of a narcotic drug? No ✓ Yes □
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support	compliance with any court order or orders issued for their support.
8. Full name of father Thomas Oliven Helderbrond	8. Full name of father Altray Show
Residence of father (if deceased so state) Jagonsport, Andiova	Residence of father (if deceased so state)
	and .
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Corol Pall Juckler	9. Full maiden name of mother fanne Value
Residence of mother (if deceased so state) Lagorsport, Judiane	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Andliana	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.	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed Thomas D. Heldebrand	Signed Vicke Lyun Osborn
Signed O	New Address 701 HCIM St.
New Address	
Subscribed and sworn to before me this. 3 day of Opril 19.81	Subscribed and sworn to before me this 25 day of Novel 198/
Mary Yore Russell Clerk HENDRICKS Circuit Court	Norg Your Rusself Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of
Signed Father	SignedFather
Signed	SignedMother
Signed	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of, 19	Subscribed and another Clerk
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	ourt by written order issued and filed
HENDRICKS	of a marriage license to the above named parties.
inauthorizes and directs the issuance of	A MATTING OF CEPTIFICATE
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen	nse issued by the clerk of the
of Indiana dated the day of day	. Micking Sun Soder O alson
Shomas O Hildenbrand	office, to-wit:
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the day of County of Hond
	at F () OL
one thousand nine hundred and 81 State of Indiana Con I & Con a D. Hilden brand	County, State of
State of Indiana, Groom Towas O. Huder Ward	
and Discourse of the second	County, State of HENDRICKS
and, Bride Sicki & Obborn of C	County, State of HENDRICKS 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
were by me united in marriage as authorized by a marriage license issued for	that purpose by the Clerk of the Circuit
were by me united in marriage as authorized by a marriage license issued for County. Dated this day of , 19 8	1. Signed Devey a Thankston
were by me united in marriage as authorized by a marriage license issued for County. Dated this day of , 19 8	1 Signed Devey a Thankston Official Designation Municipal 1981

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Date of Application

Health under Authority	R MARRIAGE LICENSE Mar. 25 1981 Bate of Application
of I.C. 31-1-3-2 Effective July 1, 1977	Date of Application
7 -27	FEMALE Medical Examination Report Dated 3-14-81
MALE Medical Examination Report Dated 3 -/1/- 8/	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Physician Agwar Clark	Name of Physician August in any false statement, representation or any
Name of Physician 7 [18]	Whoever procures the issuance of a license to marry by any false statement, representation or prelense FEMALE APPLICANT
shall be fined in any sum not exceeding	FEMALE APPLICANT
MALE APPLICANT Middle Middle	Name Planetia Lynn andreus
Name Tuchael Tay Taulkenburg	Date of Birth Month 1958
Date of Birth Month	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address & Seet or R. B. County State
Residence Address y Street or R. R. Stry	Day Married & OR
Previous Marital Status: Never Married OR	Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment D
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Other (Specify) A. J. Frence
Other (Specify) A August mind?	The state of the s
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes" has the adjudication been removed" No Van
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	2 Are you afflicted with a transmissible disease" No D Yes O
3. Are you related to the female applicant closer than second cousin?	
4. Are you now under the influence of intoxicating liquor? No 🖫 Yes 🗆	4 Are you to
5. Are you now under the influence of a harcotic drug.	6 List the full names of any dependent children
6. List the full names of any dependent children.	
7. Are you required by any court order or orders to support the above	7 Are you required by any court order or orders to support the above
dependent children?	A second state of the seco
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	compliance with any court order of Orders issued for their suggest.
8. Full name of father Pay J. faulker burg	8 Full name of father Kaymond L. andrews p.
Residence of father (if deceased so state) flainfield, state	Residence of father of deceased so state) I languelle of the
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Isther Wolkon	9 Full maiden name of mother Kackel M. Cark
Residence of mother (if deceased so state) Sample of the control	Residence of mother (if deceased so state) + Denfeld, In .
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS Sa: I depose and state the information gives a said in this application is true and correct in this application is true and correct in the same of the sam	State of Indiana, I depose and state the information given
County of the contract of the	County of TIENDRICKS
Signed Will Familie	Lew and Dailerd mass
New Address 3/13 Fairway Prise Haitield	Were Address S113 & arrivary Dr Blande
Subscribed and sworn to before me this	Subscribed and sworn to before me this 2 5 May of If fall 1967.
Clerk HENDRICKS Circuit Court	Il any form Thesell ark HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
	The consent of the other parent unnecessary
State of Indiana, County of HENDRICKS } ss:	State of Indiana,
County of	County of HENDRICKS
Signed Father	Signed Father
Signed	
Subscribed and sworn to before me this day of 19	Subscribed and appear to be
Cleri	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO	The state of the s
HENDRICKS County Superior II	URT. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance	ce of a marriage license to the
RETURN OF MARRIAGE LICE	NSE AND MARRIAGE CERTIFICATE
Michael Ray Falkenbrurg	icense issued by the clerk of the HENDRICKS Circuit Court and Lenetra Hendrizing the joining together as husband and wife
1 ANTINE I TO THE IN M	11 Office 4
one thousand nine hundred and Light is one	hereby certify that on the 28th day of March
State of Indiana, Groom Michael Ray Falkent	at Plainfield day of Marin
and, Bride Wellia Lynn Undrews	Thereon Country of Minus
County. County.	hereby certify that on the 28th day of March at Plainfield County of Hindricks Hindrick County, State of Indiana for that purpose by the Clerk of the Circuit County, State of HENDRICKS
were by me united in marriage as authorized by a marriage license issued for Dated this 18th day of MACh, 19.	or that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	Similar A Mark
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Designation
of the State of Indiana this	4th Miller

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

No	121		
File			
	n.	11	200

The state of the s	County
MALE Medical Examination Report Dated 3-23-8/	FEMALE Date of Application
MA TO	Medical Examination Report Dated 3-83-8/
Name of Far	Name of Dhair All Red
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whose shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	ever progress the
shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	The dress the issuance of a license to marry by any false statement, representation or pretense
Name /First Middle	FEMALE APPLICANT
1/ lornas 1, 1/ pollen	Name Figst ' Middle L' Last
Date of Britis	Date of Birth Month Day Year
Place of Birth (State or foreign gountry)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	But the state of t
12/ 10 William At a Drawsburg In.	Street or R. N. County State County State County County State County Co
Previous Marital Status Never Married OR	Previous Marital Status: Never Married GOR
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) School Record	Other(Specifu)
1. Are you now or have you ever been adjudged to be of unsound mind?	other (openly)
If answer is "yes", has the adjudication been removed? No □ Yes □	Are you now or have you ever been adjudged to be of unsound mind? No □ Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □
2. Are you afflicted with a transmissible disease? No Yes O	2. Are you afflicted with a transmissible disease? No Pres
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No G Yes D	4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
5. Are you now under the influence of a narcotic drug? No Yes 6. List the full pames of any dependent children.	5. Are you now under the influence of a narcotic drug?
atawayna Laixe	6. List the full names of any dependent children.
- narmynu puero	- Latawnya James
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
dependent children? No□ Yes□ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order of orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Juliard at Millinger	8. Full name of father 11 0 mile 2 Aunce
Residence of father (if deceased so state) Haune Scure, In.	B
Dol	K. A.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother College Whalley	9. Full maiden name of mother Allegaria
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Meblo , (plorado
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana. I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of
Signed Ahonus & Bullagia	Signed Delibre and Journes
New Address /2/D Williams Da.	New Address 121 D Williams Lywe
Subscribed and sworn to before me this 24 day of 198/.	Subscribed and sworn to before me this all day of All as
THENDRICKS	Marin Are Kradl Clerk HENDRICKS Circuit Court
any fine Assell Clerk HENDRICKS Circuit Court	fill fishing the
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 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.
signs, state facts which render the consent of the other parent unnecessary	signs, state raves
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS ss:	County County
Signed Father	Signed Father
Mother	Signed
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19	Clerk
Clerk	for the shows named parties the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above hamed parties, the
in	of a marriage north
DETUDN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
The Tit Warman thank there was filed in my office a marriage licer	ase issued by
of Indiana dated the 30 day of March	nse issued by the clerk of the
of Indiana dated the 30 day of and a Be it further remembered, the following marriage certificate was filed in my of the state of the s	office to-wit:
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the day of County of Marien,
one thousand nine hundred and 81	at Ind slow, County of Jones,
one thousand nine hundred and	County State of
State of Indiana C	County State of
were by	that purpose by the Clerk of the Circuit Court of
and, Bride of were by me united in marriage as authorized by a marriage license issued for County.	
Dated this day of Opil , 198	Signed Dewer & Mienier
	Official Designation 1981
Filed and recorded in accordance with the laws of the State of Indiana this	day of Clerk
wea and recorded in accordance with the laws of the State of Indiana this	Signed Many HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

___County

March 26, 198
Date of Application

.... Circuit Court

MALE Medical Examination Report Dated 3-19-81 Name of Physician Paley Name of Physician Paley		
Name of Physician Wieisensa	Name of Physician f. doreg	
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Wh	oever procures the issuance of a license to marry by any false statement, representation or pre-	
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	First o Middle	
Name First Middle Word	Paula M. Toglor	
Date of Birth Mgnth Day Year	Date of Birth	
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	
RR4 Box 261-F2 Clayton, didioner	Previous Marital Status Never Married OR	
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment O	Last Marriage Ended By Death Divorce Annulment	
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree	
O line allows	Other (Specify) Drivers Lie W/Pic	
Other (Specify) A SALVERS OF WHITE No WYES 1. Are you now or have you ever been adjudged to be of unsound mind? No WYES	1. Are you now or have you ever been adjudged to be of unsound mind? No D Y	
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed. No Q Y	
2. Are you afflicted with a transmissible disease? No Yes No Ye	Are you afflicted with a transmissible disease. No Py Are you related to the male applicant closer than second cousin. No Py	
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes	4. Are you now under the influence of intoxicating liquor? No Dy	
5. Are you now under the influence of a narcotic drug? No 2 Yes	5. Are you now under the influence of a narcotic drug? No D y	
6. List the full names of any dependent children.	6. List the full names of any dependent children.	
Liesce Herold 15	Hattreen Taylor 14 Jemips Taylor	
Thelody 11	Wesley Taylor, In 11	
Thelisa 7	Elizabeth Taylor 10	
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above dependent children. No 2 Y	
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that your	
compliance with any court order of orders issued for their support	compliance with any court order or orders issued for their support.	
Full name of father Clebbe & General	8. Full name of father Aller A Herrin	
Residence of father (if deceased so state) and avappalis, And	Residence of father (if deceased so state) Joseph , Hel	
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)	
Full maiden name of mother / Mory / Junes	9 Full maiden name of mother Helen M. Werby	
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Loveylow, Lill	
Birthplace of mother (State or foreign country) Judiana, tate of Indiana,	Birthplace of mother (State or foreign country).	
county of HENDRICKS sa: I defose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sax: I depose and state the information g in this application is true and cord	
Signed Konstal f. Oderald		
New Address Route 4. Claston	Signed Cala Vaylor	
ubscribed and sworn to before me this de day of Morch 198/	New Address Rocete 4, Clayton	
Mora Jane Russell a HENDRICKS	Subscribed and sworn to before me this de day of Morch , 196	
Circuit Court	May lone Rusself Clerk HENDRICKS Circuit C	
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN	
ve, 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 par	
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary	
ounty of HENDRICKS ss:	State of Indiana,	
Signed	County of HENDRICKS	
Signed Father Signed	Signed Fat	
Signed	Signed	
ubscribed and sworn to before me this day of	Subscribed and sworn to before me this day of 19	
Clerk		
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT		
HENDRICKS County	urt by written order.	
authorizes and directs the issuance of	f a marriage license to the	
Be It Remembered, there was filed in my a	E AND MARRIAGE CERTIFICATE	
e it further remembered, the following marriage certificate was filed in my o	se issued by the clerk of the HENDRICKS Circuit Con., 19.8 , authorizing the joining together as husband and w	
Mediate was filed in my o	fice, to-wit:	
thousand nine hundred and the state of Indiana, Groom the	day of County of Lead	
a, Bride Addles III Sanda	County of Jana	
unty	County, State of	
cere by me united in marriage as authorized by a marriage license issued for the steel this day of figure 19.	hat purpose by the Clerk of the Circuit Court of HENDRICKS	
	feet.	
iled and recorded in accordance with the laws of the State of Indian	Official Designation Charles	
of the plate of L. 1.	a martin	

.Clerk

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

	153	
No	223	net men
File	. 42	
		N. OFFI

MALE	Date of Application
Medical Examination Report Dated 3-24-81	FEMALE Medical Formation
Name of Physician Coal Heinlein	Medical Examination Report Dated 3-24-8
	Name of Physician Cool Heinlein
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whoshall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any foles determined
MALE APPLICANT	to marry by any raise statement, representation or pretense
Name First Middle Last	Name First
Date of Birth Month Die Year	A Middle Last
11, 104	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. City County State	0.1
RRI Box 309 A Clayton State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	The Dox 309 A Clayton, Ind
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of Dirth vertiled by Dirth certificate - Studietal Decree	Date of birth verified by: Birth Certificate Judicial Decree
& Other (Specify) Drusses his of part	4
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	A Other (Specify) Dances fix which
	1. Are you now or have you ever been adjudged to be of unsound mind? No X Yes D
10- 165-	If answer is "yes", has the adjudication been removed? No □ Yes □
	2. Are you afflicted with a transmissible disease? No Y Yes
	3. Are you related to the male applicant closer than second cousin? No 🗖 Yes 🗆
	4. Are you now under the influence of intoxicating liquor? No ♥ Yes□
5. Are you now under the influence of a narcotic drug? No D Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
0. List the full names of any dependent enfidrent	6. List the full names of any dependent children.
The state of the s	
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Pes D
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8 Full name of father Whatas . Block of one S.	compliance with any court order or orders issued for their support.
8. Full name of father the state of the stat	8. Full name of father James C. Educas de fr.
Residence of father (if deceased so state) Tens York	Residence of father (if deceased so state) Laliponia
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
2 1 10 2 11	2.00+
9. Full maiden name of mother 1200 11. 2000	9. Full maiden name of mother Rossing 1. Malan
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Significant	Birthplace of mother (State or foreign country)
State of Indiana.	State of Indiana, I denote and state the information given
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	County of HENDRICKS 88: In this application is true and correct.
made below	Rett O dolder
Signed S. M. C. Stormer Co.	Signed Y Carry Old + 1
New Address S. K. FOX 309 A. LITYTON M.	New Address SRIBOX 309 A Clayton and
Subscribed and sworn to before me this and day of Month 1951	Subscribed and sworn to before me this and day of Massell, 1981.
M & MENIDPICKS	Many Jana Russold Clerk HENDRICKS Circuit Court
Manyone Tustell Clerk HENDRICKS Circuit Court	CIEIX CHEIX
	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 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	signs, state facts which render the consent of the other parent unnecessary
	State of Indiana,
State of Indiana, County of HENDRICKS sa:	State of Indiana, HENDRICKS County of
County of HENDRICKS	Father
Signed	Signed
Signed Mother	Signed
	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of, 19	Clerk
Clerk	
	T A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	1. A marriage medical and filed and filed
HEVIDDICKS	mirt by Written order issued
inauthorizes and directs the issuance of	of a marriage needs to
TOTAL STATE OF THE PARTY OF THE	E AND MARKIAGE CERTAIN LIENDON K
Be It Remembered, there was filed in my office a marriage licen	ise issued by the clerk of the
We M Remembered, there was filed in my office a murrage them	nse issued by the clerk of the
of Indiana dated the day of TI William	and Retty Authorizing the joining the
W C LL B. L. C C	nd
be it further remembered the following marriage certificate was filed in the	day of Salan,
dunc dunce	at Lawrence, County of Jagran,
one thousand nine hundred and	County, State of
State of Indiana, Groom - The Many W.	County, State of
State of Indiana, Groom Manay a Brokehan and, Bride Setty a Helder of	he the Clark of the Circuit Court of HENDRICKS
were by me united in marriage as authorized by a marriage weeks were	
	Signed Dough Swith
Dated this day of Opul , 19 41	Though the state of the state o

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

3-27-81 Date of Application

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 HENDRICKS	S County Date of Application
Effective July 1, 1977	FEMALE Medical Examination Report Dated 3-17-81
MALE Medical Examination Report Dated 3-17-8	of Physician Cruc D. Clark
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoe has fined in any sum not exceeding five hundred dollars (\$500,00)".	ver procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement shall be fined in any sum not exceeding five hundred dollars (\$500,000", shall be fined in any sum not exceeding five hundred dollars (\$500,000").	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Rath!!
Name First Middle Worden T	Date of Birth Month Day Year 1940
Date of Birth Month 1958	Place of Birth (State or foreign country)
Place of Birth (State or foreign country) Lebanon Country State	Residence Address Street or R. R. Bity County State Residence Address Box 205 Lighton Repol and
Residence Address Street or R. R. City County State Street or R. R. City County State Lamnuscase Languelle Manol Street	TX DOTALL TO
Previous Marital Status: Never Married OR	Previous Marital Status Never Married OR Last Marriage Ended By: Death Divorce Annulment O
Last Marriage Ended By: Death Divorce Annulment Annulment	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
Other (Specify) Driver Licensel 4 picture No Ves	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No P Yes D
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed." No Ves 0
If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease. No Ves
2. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yes D 4. Are you now under the influence of intoxicating liquor? No Yes D
. 4. Are you now under the influence of intoxicating liquor?	5. Are you now under the influence of a narcotic drug? No Yes O
Are you now under the influence of a narcotic drug? List the full names of any dependent children.	6. List the full names of any dependent children.
6. List the full names of any dependent constraint	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father trederick Ray Margan	8. Full name of father Sinton Ind.
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Unclesson In .	Birthplace of father (State or foreign country) By His Low Losse leas
9. Full maiden name of mother 40 cmm Noxers	9. Full maiden name of mother Line Lond
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana, I demose and state the information given	Birthplace of mother (State or foreign country). State of Indiana. I depose and state the information given
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	County of HENDRICKS as: in this application is true and correct
Signed X Fred Morgan	Signed Penny Sus Ratliff
New Address Same	New Address 455 & Denne Danville
Subscribed and sworn to before me this 27 day of MARCh 1987.	Subscribed and sworn to before me this 27 day of MO4Ch, 19.21
Mary Jane Russell Clerk HENDRICKS Circuit Court	Mary Jane Russell Glerk HENDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS PARENT OF CHARMAN
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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, Country of HENDRICKS } ss:	State of Indiana,
County of	County of HENDRICKS
Signed	Signed Father
Signed Mother	SignedMoth
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of19
	Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the
County	RT. A marriage license having been refused to the above named parties, to Court by written order issued and file
- Issuance	of a marriage license to the above named parties
Be It Remembered, there was filed in my office a marriage li	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	ense issued by the clerk of the HENDRICKS Circuit Cou
Be it further remembered, the following marriage certificate was filed in my	and and wi
one thousand nine hundred and S	office, to-wit:
one thousand nine hand	hereby certify that the
and Bride 20 mm Single Roy Com	of Hand
and, Bride. Rose Rottliff of Marriage as authorized by a marriage license issued for County.	Hond County, State of
were by me united in marriage as authorized by a marriage license issued for Dated this	r that purpose by the Clerk of the Circuit Court of HENDRICKS

Filed and recorded in accordance with the laws of the State of Indiana this day of Signed Signed HENDRICKS Circuit Co

Official Designation Parts

..... Circuit Court

Dated this.

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

STATE OF INDIANA

APPLICATION FOR MAI

No. 125

I.C. 31-1-3-2 Iffective July 1, 1977 HENDRICK	SCounty File
MALE Medical Examination Report Dated 3.23-81 Name of Physician Larry Love 10	FEMALE Medical Examination Report Dated 3-3-8/
	Name of Physician Harry Hovall
LL QUESTIONS MUST BE ANSWERED. T.C. 31-1-3-6 prescribed "False statement—Whoe hall be fined in any sum not exceeding five hundred dollars (\$500.00)".	ver procures the issuance of a license to marry by any false statement, representation or pretense
ame First Middle Last	FEMALE APPLICANT
Hay I raword	Name First Middle Last
ate of Birth (State or foreign country)	Date of Birth Month Day Year
Street or R. R. J. Com.	Place of Birth (State or foreign country)
esidence Address Street or R. R. Street or R. R. County State	Residence Address Street or R. R. City County State
revious Marital Status: Never Married OR	Province Marital States V. J. S. C.
ast Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivero Cécarise upicture	& Other (Specify) Divers license w/picture
Are you now or have you ever been adjudged to be of unsound mind? No. Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No. Yes□
If answer is "yes", has the adjudication been removed? No Yes N	If answer is "yes", has the adjudication been removed? No□ Yes□
Are you related to the female applicant closer than second cousin?	2. Are you related to the male analysis disease?
. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? No Yes □ 4. Are you now under the influence of intoxicating liquor? No Yes □
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug?
List the full names of any dependent children.	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. Full name of father Store 12	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) Danville Along	8. Full name of father (if deceased so state) () out to and i
	nessuence of father the decease so state.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mothek	9. Full maiden name of mother 1
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given
County of HENDRICKS ss: in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
Signed Henry A Crawford	Signed To have a Carobino
New Address PO Box 251 Clayton Ind	New Address P.O. Box 357 Clarten Stars
Subscribed and sworn to before me this 27 day of March, 1981	Subscribed and sworn to before me this 27 day of March, 1951.
Circuit Court	Mary fore Russellark HENDRICKS 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 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
igns, state facts which render the consent of the other parent unnecessary	signs, state racto
	3)
	State of Indiana, State of Ind
State of Indiana, County of HENDRICKS ss:	County of HENDRICKS
SignedFather	Signed Willet M. Facher Father
Signed	Signed Maybert & Fisher Mother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this
Clerk	May Jan Pussell Clerk
COMPANY DV ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	ourt by written order issued
n authorizes and directs the issuance	01 4 111412-1-8
PETURN OF MARRIAGE LICENS	E AND MARKIAGE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage titel	, 19.8/, authorizing the joining together as husband and wife
one thousand nine hundred and S.	at Hazelwood, County of State of
oldle of Indiana C	County, State of
and, Bride Saril Dikes of	HENDRICKS HENDRICKS
were by me united in marriage as authorized by a marriage license issued for	that purpose of the
County. Dated this S day of Open 198	Signed Storon W. Ranson
auy oj	1111MAPL

Official Designation.....

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

- 30.81 Date of Application ___County

.Circuit Court

	FEMALE 3.23.81
MALE Medical Examination Report Dated 3.23.81	Medical Examination Report Dated Name of Physician Report Dated Name of Physician
Name of Physician 1C 31-1-3-6 prescribed "False statement—Who	oever procures the issuance of a license to marry by any false statement, representation or
OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who	oever procures the issuance of a license to marry by any false statement, representation

Medical Examination Report Dated 3333	Name of Physician Carl Neunlein
Name of Physician Cal Neunlein	resources the issuance of a license to marry by any false statement, representation or preten
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who	pever procures the issuance of a license to marry by any false statement, representation or pretent
shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	First Middle 01 los
Name First Middle Road Ast	Name Julia Una Dray
Date of Birth Month Day	Date of Birth O Month 30 19620
Place of Birth (State by foreign pountry)	Place of Birth (State or foreign country)
Anades, Indiana State	Residence Address Street or R. R. City County State
Residence Address Street or R. R. City Planted, Sol	2040- Minont, Variable of
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Sirth Certificate Judicial Decree	Date of birth verified by
Other(Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No ▼ Yes□	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
If answer is "yes", has the adjudication been removed? No □ Yes.□	If answer is "yes", has the adjudication been removed? No Yes
2. Are you afflicted with a transmissible disease?	Are you afflicted with a transmissible disease? No Yes Are you related to the male applicant closer than second cousin? No Yes
3. Are you related to the female applicant closer than second cousin? No Yes No Yes Yes	Are you now under the influence of intoxicating liquor? No Yes
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? Now Yes	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Tutle & Constitution of the Constitution of	8. Full name of father Sound 111 Kee
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother thyllis an Schwenk	9. Full maiden name of mother Renda & Smith
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	~ ~
State of Indiana,	Birthplace of mother (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.
Signed Navid Wayne Bawley	Signed Aulia ann show
New Address 224 W of remont Plantake	Signed Julia ann Snay New Address 224 W. Fremont
Subscribed and sworn to before me this day of March 198	
Mary Jane Russlerk HENDRICKS Circuit Court	Subscribed and sworn to before me this 30 day of March, 1981
CIrcuit Court	Mary Jane Russellerk HENDRICKS 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 parent	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	
	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
SignedFather	County of HENDRICKS
Signed Mother	Signed Father
bubscribed and sworn to before me this day of 19	Signed Mother
	Subscribed and sworn to before me thisday of, 19,
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	
County County	T. A marriage license having been refused to the above named parties, the art by written order issued
authorizes and directs the issuance of	f a marriage lieses and filed
D. Domasson	and include to the above named parties
Be It Remembered, there was filed in my office a marriage licens day of day of	se issued by the clerk of the
Parid W. Barts	se issued by the clerk of the HENDRICKS Circuit Court 19.8 authorizing the joining together as husband and wife fice, to-wit:
to further remembered, the following marriage certificate was filed in an	ad wife
tata of I. J	. Distriction and the second s
nd. Bride	(County of
ere by me united in marriage as a self-	How County, State of Jack
nd, Bride of marriage as authorized by a marriage license issued for the ated this.	hat murnous by the County, State of
ere by me united in marriage as authorized by a marriage license issued for the ated this day of day of , 19.8	nut purpose by the Clerk of the Circuit Court of HENDRICKS
7 7 1111711.1	
iled and recorded in accordance with the laws of	Official Designed & Sheet & Marlett
iled and recorded in accordance with the laws of the State of Indiana this	Signed Robert & Marlett Official Designation

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100 total (600 total (100 total (
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	2
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5	1211		TRACE
APPLICATION	FOR	MARRIAGE	LICENSE

OR MARRIAGE LICENSE	File
NDRICKS County	Date of Application

Form Prescribed By Indiana State Board of	APPLICATION FOR I	MARRIAGE LICENSE	File
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICK	County	Date of Application
Effective July 1, 1977		FEMALE	3.22.81
MALE Medical Examination Re	eport Dated 3.23.81	Medical Examination Report D	ated Doin le's
		Name of Physician	in any false statement, representation
ALL QUESTIONS MUST BE A	NSWERED, LC, 31-1-3-6 prescribed "False statement—Whom	over procures the issuance of a license to many	A DDI ICA NIT
shall be fined in any sum not exc	reeding five hundred dollars (\$500,00)". MALE APPLICANT	Name First	APPLICANT Middle Last
Name First	Wayne Barbay	Date of Birth Month	Day Year
Date of Birth Month	Day Year 19 (03)	Place of Birth (State or foreign country)	130 19620
Place of Birth (State or foreign co	es. Indiana	Residence Address Street or R. R.	City County State
Residence Address Street	Nemont Plantiell, State	224 W- 2/10	mont, tampeld and.
Previous Marital Status: Never Marrie		Previous Marital Status Never Married Off	Annulment D
Last Marriage Ended By: Death I I Date of birth verified by: Sirth Ce		Date of birth verified by Birth Certificate	Judicial Decree
Other (Specify)		□ Other (Specify)	
1. Are you now or how you are	No W Van 🗆	1 Are you now or have you ever been adjudged t	a be of unsound mind"
2.			
3.			9
4. 5.			
6. I			
			-
1-4			10 m
7. A			
de If	MARCH 27, 1981		a
co			in
8. F	SUBJECT: PERMISSION OF MARRIAGE C	OF A MINOR SON:	
Re			
9. Ft			
Re .			
THIS IS AN AFFIDAVIT GIVING PERMISSION FOR MY SON DAVID W. BARTLEY			
State o County			
INDIANAPOLIS, INDIANA,			
Subscribed and a	TO MARRY AND TAKE FOR HIS LAWFULLY WEDDED WIFE JULIA A. MCKEE (GRAY)		
CONS			
We, t			
Hubert Bartley			
HUBERT BARTLEY (FATHER)			
P1 11: 2 +1			
State		PHYLLIS BARTIEV	lly -
Count		PHYLLIS BARTLEY,	CMOTHER
一个 有一个	COUNTY OF HENDRICKS SS:		
Subsc	BEFORE ME THE UNDERSIGNED, A NOTAR STATE OF INDIANA, PERSONALLY APPEA	Y DURITO FOR HENDE	er
	STATE OF INDIANA, PERSONALLY APPEA	RED,	UNTY,
CON		Hulest Bart	7 et
		HUBERT BARTLEY	-
in		Phyllis Bat	the ed
M	ACKNOWLEDGED THE EXECUTION OF THE	DARTLEY	
of .	ACKNOWLEDGED THE EXECUTION OF THE 127TH. DAY OF MARCH, 1981	FOREGOING INSTRUMENT THIS	
Be			ri In
7	SEAL		
one Sto		- V	
and	MY COMMITTEET COM	TOHN OLSON, NOTAL	RY PUBLIC
we Co	MY COMMISSION	EXPIRES: F 23, 1985	400
Da	minimize.		· · ·

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

Official Designation. Signed Many

Circuit Court

APPLICATION FOR MARRIAGE LICEN

No	127	
File		

I.C. 31-1-3-2 fective July 1, 1977 HENDRICK	County File 3-30-80
MALE	Date of Application
Medical Examination Report Dated 3-27-81	FEMALE Medical Examination Report Dated
Name of Physician G. T. Robbins	Name of Physician C T D 1
LL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement, Wh	Name of Physician G. T. Robbins ever procures the issuance of a license to marry by any false statement, representation or pretense
all be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
me First Middle	FEMALE APPLICANT
ate of Birth Month Day Year	Name Circuthia Middle (Last
// Year // 1200	Date of Birth Month Day Year
ace of Birth (State or foreign country)	Place of Birth (State or foreign country)
sidence Address Street or R. R. Plat County State	Residence Address Street or B. R. Gity County (States
revious Marital Status: Never Married OR	231 School Rd. Plfel Genel State
st Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married B OR
ate of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Duna La alia	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers License Upectaro	6 Other (Specify) Secense of sectors
Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No Yes Are you afflicted with a transmissible disease? No Yes Yes	If answer is "yes", has the adjudication been removed?
Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease? No Yes 3. Are you related to the male applicant elegant than accord assisting.
Are you now under the influence of intoxicating liquor? No E Yes C	 3. Are you related to the male applicant closer than second cousin? No ☐ Yes ☐ 4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
Are you now under the influence of a narcotic drug? No D Yes D	5. Are you now under the influence of a narcotic drug?
List the full names of any dependent children.	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No□ Yes□	dependent children? No Ves C
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. Full name of father Control Contr	compliance with any court order or orders issued for their support. 8. Full name of father GLOCAL J. MON
() =	
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Inalple Ind.
Full maiden name of mother Mancy Varion	9. Full maiden name of mother Nanne C. Rawandyas
Residence of mother (if deceased so state). Manuelle Ind.	Residence of mother (if deceased so state) Inalple Incl.
Birthplace of mother (State or foreign country) Judiple Ind	Birthplace of mother (State or foreign country) Josonto, Canacola
ate of Indiana.	State of Indiana, HENDRICKS Bas: I depose and state the information giver in this application is true and correct
unity of	County of this application is true and correct
Signed X William a. France	Signed (unthea) Inkon
New Address 431 School Rd	New Address 73/ School Rd.
abscribed and sworn to before me this 30 day of March, 1987.	Subscribed and sworp to before me this. 30 day of March, 1981
Many of the sand HENDRICKS	Mary Jane Russell Clerk HENDRICKS Circuit Cour
Clerk Court	- Jewing ff
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
e, 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
ns. state facts which render the consent of the other parent unnecessary	
ate of Indiana,	State of Indiana, HENDRICKS ss:
unty of HENDRICKS } ***	County of
Signed Father	Signed
Signed Mother	Signed
bscribed and sworn to before me this	Subscribed and sworn to before me thisday of
	Cleri
Clerk	I to the shows named parties the
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	of a marriage needs
- FORM	TO AND MARKIAGE CLASS CONTRACTOR
Be It Remembered, there was filed in my office a marriage licer	nse issued by the clerk of the the initial together as husband and wife
(1) (lian) (d) Ftelham	Fra to anit:
e it further remembered, the following marriage certificate was filed in my	berehv certify that on the day of day of
10.41	The state of the s
alle of Indiana a	County State of
ere by me united in marriage as authorized by a marriage license issued for munty.	that purpose by the Clerk of the Circuit Court of
re by me united in marriage as authorized by a marriage license issued for	that purpose to
unty.	a, D. Stump

Official Designation....day

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

HENDRICKS

...Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

___County

File__

3-3-8/ Date of Application

fective July 1. 1971	FEMALE Medical Examination Report Date	d_ 3-21-81	
MALE Medical Examination Report Pated 3-21-8	a Dhwaiaian	Joseph	
Name of Physician LL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who fixed in any sum not exceeding five hundred dollars (\$500,00)".	Name of Thysical	any false statement, represent	ation or pretense
Name of Physician. I AUSTREANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who	ever procures the issuants	PPLICANT	
LL QUESTIONS MUST BE ANSWERED. I.C. 31-1-30-0 pt. (8500,00)". all be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT	First -	Middle 6/.	Last
MALE APPLICANT Maddle First Middle FAU	Name	Day Ye	ar
te of Birth Month Day	Date of Birth Month Place of Birth (State or foreign country)	26 14	59
ace of Birth (State optoreign country)	Greenway	City Coupty	State 1
Greensburg Incl. County of State	Residence Address Street of R. R. Box 92	Greensburg Dece	tus In
sidence Address Street or R. R. Lanulle Kim She	Previous Marital Status: Never Married OR		
revious Marital Status: Never Married OR	Feded By: Death Divorce A	Indicial Decree	
ast Marriage Ended By: Death Divorce Annulment Late of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate	1 . 410	`_
Quinter of Printers	Other (Specify) Drules 3	icense 7 pl	No B Yes!
Other (Specify) No B Yes Are you now or have you ever been adjudged to be of unsound mind? No D Yes	Are you now or have you ever been adjudged to be	e of unsound mind:	No D Yes
No 2 1 195	If answer is "yes", has the adjudication been remo 2. Are you afflicted with a transmissible disease?		No 19 Yes
Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than	second cousin?	No Yes
Are you related to the female applicant closer than second cousin:	4. Are you now under the influence of intoxicating l	liquor?	No Yes
Are you now under the influence of intoxicating liquor? No Yes No Yes	5. Are you now under the influence of a narcotic dre	ug?	No = Tes
List the full names of any dependent children.	6. List the full names of any dependent children.		AF
	7. Are you required by any court order or orders to	support the above	4
Are you required by any court order or orders to support the above No Yes dependent children?	dependent children?		No □ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Applicat		proof that you are
compliance with any couft order or orders issued for their support.	8. Full name of father or man	Nockson	
Residence of father (if deceased so state) Green Shugelad.		convolung Ind	7.
0		Freensburg,	nol,
Marth Range Illa Hays	9. Full maiden name of mother Janet	amkhein	
Residence of mother (if deceased so state) Brownsburg Ind.	Residence of mother (if deceased so state)	Freensburg,	Ind.
Birthplace of mother (State or foreign country) Greensburg, Incl.	Birthplace of mother (State or foreign country)	Greenburg &	sel
State of Indiana.	State of Indiana, HENDRICKS	ss: I depose and state the in this application is	information give
County of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS	W O	d 1
Signed Greg 9 Juy	Signed X Dla	re K. Ha	ason
New Address A # 3 120 2 17 Day Call	New Address R#3	Box 214 D	asirie
Subscribed and sworn to before me this 3/ day of 1000 1987.	Subscribed and sworn to before me this		19.0
Mary Jane Russell Clerk HENDRICKS Circuit Court	1 lary Jan Russell	Clerk HENDRICKS	Circuit Co
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GU	TARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	We, the parents, of this applicant hereby give		If only one pa
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent		

		***************************************	********************
State of Indiana,	State of Indiana,		
County of HENDRICKS ss:	County of HENDRICKS	· ss:	
Signed Father	Signed		Fr
Signed	Signed		М
Subscribed and sworn to before me this day of , 19 , 19	Subscribed and sworn to before me this		
Clerk			*************
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO HENDRICKS County	URT A marriage V		·tion
			ned parties,
and directs the issuance	e of a marriage license to the above name	d narties	
of Indiana dated the	cense issued by the clerk of the	HENDRICKS	Circuit C
Be it further remembered, the following marriage certificate was filed in m	, 1981, authorizing the	e joining together as hu	isband and
Be it further remembered, the following marriage certificate was filed in m	y office, to-wit:		
and thousand aire handed at S.	hereby certify that on the	day of Oppil)
	and a self was a self-		ration
State of Indiana Cusam		, County of	1 1
State of Indiana, Groom Despois & Sugar Haden	of Hand	County, State of	and an
State of Indiana, Groom of were by me united in marriage as authorized by a marriage license issued County. Dated this day of , 19	or that must	County, State of County, State of	Drof.

Official Designation....

HENDRICKS

....Circuit Court

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

STATE OF INDIANA

129

th under Authority C. 31-1-3-2 1977	MARRIAGE LICENSE
C. 31-1-32 HENDRICK	S
	Date of Application
MALE Medical Examination Report Dated 3-23-81	FEMALE Medical Evamination D
Name of Physician Thomas Walker M.D.	Medical Examination Report Dated 3-10-81
THE ANSWEDED IC 21 1 2 C PROPERTY LARV	Name of Physician Donas Wolker ever procures the issuance of a license to marry by any false statement, representation or pretense
IL QUESTIONS MUST BE ANSWERED FOR SPEAR prescribed "Faise statement—Who all be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
First Middle 1 Last	FEMALE APPLICANT
anathan 6. Sigmund	Name First Middle Last
te of Birth	Date of Birth Month Day Year
ce of Birth (State or foreign gountry)	Place of Birth (State or foreign country)
sidence Address Street or R. R. City County State	Residence Address . Street or R. R. City County State
evious Marital Status Never Married & OR	28 Mariana t. Boundary Dyd.
V care Ended By Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
tte of birth verified by Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other(Specify) 13-62-612874
Are you now or have you ever been adjudged to be of unsound mind? No W Yes O	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed? No Ves	If answer is "yes", has the adjudication been removed? No □ Yes □
Are you afflicted with a transmissible disease? No Yes	2. Are you afflicted with a transmissible disease?
Are you related to the female applicant closer than second cousin? No P Yes Are you now under the influence of intoxicating liquor? No P Yes No P Ye	3. Are you related to the male applicant closer than second cousin? No ♥ Yes □ 4. Are you now under the influence of intoxicating liquor? No ♥ Yes □
Are you now under the influence of a narcotic drug? No Yes O	5. Are you now under the influence of a narcotic drug?
List the full names of any dependent children.	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above No Yes	7. Are you required by any court order or orders to support the above
dependent children" No U Yes U If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No 'Yes 'If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Full name of father Robert Edward Signing	8. Full name of father Robert & Booker
Residence of father (if deceased so state) Brownsburg, In.	Residence of father (if deceased so state) 28 Maniana O. B. Grong Ind
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother rances L. Castridge	9. Full maiden name of mother fadithe law Bruco
Residence of mother (if deceased so state) Brownshing, In	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country)
State of Indiana. I depose and state the information given	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	Garage Bookers
Signed x Jarollin E. Augund	Signed (Mille Self & B'Crusa)
New Address	New Address Only 1981
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this day of April 1981. Many One Pubbl Clerk HENDRICKS Circuit Court
Clerk HENDRICKS Circuit Court	Il any face t week Clerk 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 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
signs, state facts which render the consent of the other parent unnecessary.	
The state of the s	
	and Tediana
State of Indiana, HENDRICKS } **:	State of Indiana, HENDRICKS Section 1. Secti
county of	Signed
Signed Father Mother	Signed
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this day of	
Clerk	and to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO	URT. A marriage license having been refused to the above named parties, the Court by written order issued
HENDRICKS County	Court by written order issued
Be It Remembered, there was filed in my office a marriage li	icense issued by the clerk of the
of Indiana dated the day of day	Jamas Desice
Be it further remembered, the following marriage certificate was filed in m	
1, Deane Down	hereby certify that on the County of James,
one thousand nine hundred and	at County, State of County, State of HENDRICKS
State of Indiana, Groom School Sequend	County, State of HENDRICKS
and, Bride	County, State of County, State of HENDRICKS
were by me united in marriage as authorized by a marriage ucense	
Dated this 2 day of Opin 19.	Signed Signed
	13.4.000
Filed and recorded in accordance with the laws of the State of Indiana this	day of Clerk HENDRICKS Circuit Court
recorded in accordance with the laws of the State of Thursday	Signed HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

3-31-81

of I.C. 31-1-3-2 Effective July 1, 1977	Date of Application
	FEMALE 3-27-81
MALE 3-12-8	Medical Examination Report Dated
Medical Examination Report Daged	Name of Physician Robb. K. Sterling
Name of Physician Cictoria Rouses	supposed a feetise to marry to any false statement, representation or pro-
Whom DE ANSWERED 1C 31-1-3-6 prescribed "False statement - Whom	ever procures the issuance of a ficense to marry to any false statement, representation or presente
shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name first Middle (akt)	Date of Birth Month Day Year
Date of Birth Month Day Year 1962	7 10 %
	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 Spreet or R. R. City Margare and	RI ASIN 281-0 summer news. Saw
	Previous Marital Status Never Married COR
Previous Marital Status: Never Married GOR	Last Marriage Ended By Death Divorce Annulment D
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate	
Other (Specify)	Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind?	1 Are you now or have you ever been adjudged to be of unsound mind" No Tes D
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed. No Ves D Yes D Yes D
2. Are you afflicted with a transmissible disease?	
3. Are you related to the female applicant closer than second cousin?	3 Are you is the second
4. Are you now under the influence of intoxicating liquor?	4 Arr you need the
5. Are you now under the influence of a narcotic drug?	5 ATC 100 III-
6. List the full names of any dependent children.	6 List the full names of any dependent children
7. Are you required by any court order or orders to support the above dependent children?	7 Are you required by any court order or orders to support the above dependent children No Vest
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court of the roy orders issued for their support.	compliance with any court order or orders agued for their support
8. Full name of father Robert C. Cakey	8 Full name of father Rex E. Francon
Marianulle ho	Campbu & bud
Residence of father (if deceased so state)	Residence of father (if deceased so state).
Birthplace of father (State or foreign country)	Hurthplace of father (State or foreign company)
9. Full maiden name of mother Mulareal Jane Nalland	9 Full maiden name of mother Judith a Scale
Residence of mother (if deceased so state) Modrowilland	Residence of mother of decreased so states Camby, Incl
201	Residence of mother till decreased so state;
Birthplace of mother (State or foreign country) State of Indiana,	Birthplace of mother (State or foreign country).
County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana. County of HENDRICKS as: 1 depose and state the information given in this application is true and correct.
\mathcal{O}	County of
Signed X Vonglas C. Casky	Signed X numberly a Pearson
New Address Gate WAY APTS. Lake Wood WA	New Address Yateway apto, Lakewood, WA.
Subscribed and sworn to before me this. 31 day of Mould 19 8	8 1 - M - M
Morey and Russellerk HENDRICKS	Subscribed and sworn to before me this 21 day of 11 OACA 19.91
Circuit Court	TIV Cary and Russell Court HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
	A MAN STANDARD BY A SHOOT OF THE STANDARD BY A SHOT OF THE STANDARD BY A SHOTT BY A SHO
Cl	A The second
	WILLIAM TO THE TOTAL OF THE TOT
State of Indiana, County of HENDRICKS ss:	State of Indiana.
South of the same	County of HENDRICKS
Signed Father	
Signed	Signed Father
Subscribed and sworn to before me this day of	Signed Mother
	Subscribed and sworn to before me this day of 18
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	жения при
HENDRICKS County A L NO DA A COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS County County Co	purt by written order issued 3 day wave and filed
artetis the Issuance o	of a marriage license to the
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of day of	ISE ISSUED IN THE SECOND TO SECOND IN THE SE
Be it further remembered, the following marries	, 190 , authorizing the joining together as husband and wife
The second of th	thee to will be a suit of the
one thousand nine hundred and 81	hereby certify that and the
I,	hereby certify that on the day of county of County of County of County of County
and Roide	County of County
were by me united in marriage as well in the second of	County, State of Wal
Contract the destauthorized by a marriage l'	The RA
were by me united in marriage as authorized by a marriage license issued for Dated this day of , 1981	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 1981	Contract Con
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
of Indiana this	day of Q
	Signed Head Clerk
	The state of the s
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

MALE Medical Examination Report Dated 3.13-81	FEMALE Medical Examination Report Dated 3-13-8
Name of Physician Khairi	
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Khairi
MALE APPLICANT	I license to marry by any false statement, representation or pretense
Name First Middle Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	First Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Street or R R City	Place of Birth (State or foreign country)
Residence Address Plyd. State State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	and arelated half
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR Last Marriage Ended Ry. Death C. D.
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Dudicial Decree
1 Other (Specify) Down his up peat.	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	M Other (Specify) Driesers Lie upiet.
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No ▼ Yes□
2. Are you afflicted with a transmissible disease? No 🖺 Yes 🗆	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No X Yes	3. Are you related to the male applicant closer than second cousin? No X Yes No Yes No Yes No X Yes No Yes
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father	compliance with any court order or orders issued for their support.
	8. Full name of father Robert Kerley
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother of once M. Hins	9. Full maiden name of mother Sillie B. Murdy
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Pittalooo Ind.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) winter, and
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana.
County of HENDRICKS as: in this application is true and correct.	county of
Signed Signed	Signed & Joyce ann fersey
New Address 50) = MAIN PRAINFIELD, IN	New Address 50 7 8 Main Plainfield In
Subscribed and sworn to before me this 31 day of Mosel 1951	Subscribed and sworn to before me this 31 day of Massle , 1981
Mary Jana Russello Clerk HENDRICKS Circuit Court	Many Jane Russell Clerk HENDRICKS 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 parent	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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	Court of Indiana
County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
Signed	Signed
Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before the constant control of the constant control of the constant control of the cont
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS	urt by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
THE PRINCE LICENSE	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 together as husband and wife
f Indiana dated the G day of Owril	se issued by the clerk of the
William (h) role a M. W. W.	day of day of
ne thousand nine hundred and lighting-tople	it title on the country of the crucks
tate of Indiana, Groom Richard J. Haar	. The Marines County, State of The
nd Dail	
ere by me united:	hat purpose by the Clerk of the Circuit Court of
ounty. ated this	Gilliam E. MADau
day of AA	Signed Williams
	Official Designation Minister , 1981
iled and recorded in accordance with the laws of the State of Indiana this	mary Land Musicus
	Signed I Will HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

Effective July 1, 1977	Production
	FEMALE 3-25-8/
MALE 3-25-8/	Medical Examination Report Dates
Medical Examination Report Dated	Name of Physician Robert G. Deavin
Name of Physician Albert 9. Albert	where the issuance of a license to marry by any false statement, representation or preter
Name of Physician All QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Who	ever procures the management of the second o
shall be fined in any sum not exceeding the	PENIADD III DICINI
MALE APPLICANT	Name First Middle Deast
Name First Moutin For	Date of Birth Month Day Year
Date of Birth Month Day (Sear	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Shollana
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 Gounty Gunty	All Box 94, Monrovia, Morgan, Judiana
The first individual of	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
1 . /	Marie Language Listage
Other (Specify) Privers Secense W/ Rictine	Other (Specify) Phillis Maure W particle
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yes
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No. Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No Ves
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support. 8. Full name of father Almandal Matterial Fox	compliance with any court order or orders issued for their support.
8. Full name of father 10 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	8. Full name of father FRANK Prock
Residence of father (if deceased so state) M. Dorf J. B. Bley fill a. M. D.	Residence of father (if deceased so state) 19 Pol 99, Monrowa, Wal.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Kentuckel
9. Full maiden name of mother Florence Ellen Porter	9,1 1
	9. Full maiden name of mother 6,2tall Ment
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Kentuckey
State of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct	State of Indiana, I I depose and state the information give
County of HENDRICKS in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct
Signed & Stamps In For	Regards & Rooth
New Address 956 Harmony Dr. Drydpy.	Signed X DW VV C DW W
	New Address Sale Tamony 1. Maple.
Subscribed and sworn to before me this day of 411, 198	Subscribed and sworn to before me this day of april 1950
Mary Jal Klessell Clerk HENDRICKS Circuit Court	MAN CAND ALL SOD HENDRICKS
	Glerk HENDRICKS Circuit Cou
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 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 pare
consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary.
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
	County of HENDRICKS ss:
SignedFather	Signad
Signed	Signed Father
Subscribed and sworn to before me this day of 19	Signed Mother
	Subscribed and sworn to before me thisday of19
	čilos
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	Clea
HENDRICKS County	C. A marriage license having been refused to the above named parties, the
in	I. A marriage license having been refused to the above named parties, the little parties of the above named parties, the little parties of the license to the little parties of
authorizes and directs the issuance of RETURN OF MARRIAGE LICENSES	a marriage license to the characteristics
RETURN OF MARRIAGE LICENSE	AND MADE
of Indiana dated the	Se issued by the decision of the second seco
day of love	THENDRICKS Circuit Cour
Be it further remembered, the following	, 19.00, authorizing the joining together as husband and wif
Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit:
and thousand it is	and the
State of Indiana, Groom	tt. County of County of
State of Indiana, Groom Man	County of County of County of County State of
were by me united:	County State of
and, Bride of were by me united in marriage as authorized by a marriage license issued for the date of the county.	County State of Man
were by me united in marriage as authorized by a marriage license issued for the Dated this day of 1950, 195	hat purpose by the Clerk of the Circuit Court of HENDRICKS
19 81	The Stream Court of The
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation ()
the State of Indiana this	Official Designation Master

Clerk

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No		la
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r H6-	The same of the last	

MALE Date of Application Medical Examination Report Dated FEMALE Medical Examination Report Dated Name of Physician_ Name of Physician ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense."

MALE APPLICANT FEMALE APPLICANT Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by:

Birth Certificate

Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound If answer is "yes", has the adjudication been removed No□ Yes□ No Yes D If answer is "yes", has the adjudication been 2. Are you afflicted with a transmissible disease? No D Yes D 2. Are you afflicted with a transmissible disease 3. Are you related to the female applicant closer than second co No Yes you related to the male applicant closer than 4. Are you now under the influence of intoxicating liquor? you now under the influence of intoxicating liquor 5. Are you now under the influence of a narcotic drug? Note Yes D you now under the influence of a narcotic drug 6 List the full names of any dependent children 6. List the full names of any dependent children . Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children No□ Yes□ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in No D Yes D If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Residence of father (if deceased so state) Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS Breadle 7 nuller New Address RRS BOX 2104 Chapin 4(234) 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 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. signs, state facts which render the consent of the other parent unnecessary State of Indiana, State of Indiana, HENDRICKS HENDRICKS County of ... Mother ...day of..... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County......Court by written order issued..... 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...... I day of a day of authorizing the joining together as husband and wife of Indiana dated the... and BRENDA FAYE MILLER JESS ALAN WOODRUFF Be it further remembered, the following marriage certificate was filed in my office, to-wit: WILLIAM A. PAPPANO hereby certify that on the 11th day of APRIL one thousand nine hundred and 81 at BROWNSBURG County of HENDRICKS ,
State of Lawrence County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

County of HENDRICKS ,

State of Lawrence County of HENDRICKS ,

County of HENDRICKS , State of Indiana, Groom. JESS ALAN WOODRUFF of HENDRICKS County, State of HENDRICKS County, State of HENDRICKS County, State of ... and, Bride....of...... BRENDA FAYE MILLER 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. Signed /s/ WILLIAM A. PAPPANO CATHOLIC PRIEST Official Designation..... Filed and recorded in accordance with the laws of the State of Indiana this... 11th day of

Linnal

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

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File_			
	U.	1-	21
-	Datast	10	01

... Circuit Court

Effective July 1, 1977	Date of Application
	FEMALE Medical Examination Report Dated 3-21-8
MALE 3.2 (~8)	Medical Examination Report Dates
Medical Examination Report Dated	Name of Physician Jones 10. Johnson M.D.
Name of Physician Jones B. Johnson, M. D.	is suppose of a license to marry by any false statement, representation or a
A NEW PRO 10 31-1-3-6 prescribed "False statement—Wh	oever procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED. IC. 31 shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name () First , Middle Q Last
Name First Middle Last	Month Day Year
Date of Birth Month Day	Date of Birth Month
Date of Birth Month	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	646 Kentucky Manyeld Hen of
705 Rougnouscel, Greencools and	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
& Other (Specify) Drivers because & pieline	A Other (Specify) Drivers themse to picture
	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed? No□ Yes□
If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease? No Yes D
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin No Yes O
3. Are you related to the female applicant closer than second cousin.	4. Are you now under the influence of intoxicating liquor? No Yes D
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug? No Yes O
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Matthew Colward Helmer	Raurel Jane Kolls
Matthew Coluano Morrier	J. Carrier Control
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No Yes D
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Roy C. Numer	8. Full name of father was a company of the company
Residence of father (if deceased so state) Oyle, Indiana	Residence of father (if deceased so state) Drevoatle, Induan
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
of the t	But a Devi
9. Full maiden name of mother to the contract of mother to the contrac	9. Full maiden name of mother 400016
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana,	State of Indiana, I denose and state the information given
County of HENDRICKS application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
Signed Editor Will No /	tationes tolla
New Address 534 Kentucky Ave, Planfield	Signed
	New Address 534 Flaticky Clive &
Subscribed and sworn to before pre this day of day of 190	Subscribed and sworn to before me this day of Coul, 190
HENDRICKS Circuit Court	Mary one Russell gerk HENDRICKS Grewit Court
- 01	Clerk
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 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
of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
Signed	County of HENDRICKS
Father	Signed Father
Signed Mother	
Subscribed and sworn to before me thisday of19	Signed Mother
	Subscribed and sworn to before me thisday of
Clerk	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 COUI	CT. A marriage license having been refused to the above named parties, the
in authorizes and direct the	ourt by written order issued and filed
DEMANDA	a marriage license to the above named parties.
Be It Remembered, there are fled in the MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the day of da	nse issued by the clerk of the HENDRICKS Circuit Court
Educad Halmand (frul	The se issued by the clerk of the HENDRICKS Circuit Court of the HENDRICKS Circuit Court of the HENDRICKS Circuit Court of the pointing together as husband and wife office, to-wit:
Be it further remembered, the following marriage certificate	and
1, Sev W. C. Bronks	office, to-wit:
one thousand nine hundred and S	office, to-wit: hereby certify that on the day of Opil
State of T. P.	day of
and, Bride Totale Rale	of County of Marion
one thousand nine hundred and 8 State of Indiana, Groom Fall Holman and, Bride State of Indiana, Groom Fall Holman were by me united in marriage as authorized by a	County, State of
and, Bride of Indiana, Groom of the state of Indiana, Groom of Indiana, Gr	that purpose by the Cl
Dated this day of 1950	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19 8	λ,
Filed and recorded	Official Decimality D. C. Brown
	Om
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Waste

..Clerk

.Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of LC 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	135

of I.C. 31-1-3-2 Effective July 1, 1977 HENDRICK	S File
	County 4.6.8
MALE Medical Examination Report Dated 3.31.81	FEMALE Date of Application
Name of Physician Domas Walter	Medical Examination Report Dated 3-31-8
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "Falso statement and all prescribed an	Name of Physician Thomas Walker
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
First Middle	FEMALE APPLICANT
Dennis a last	Name First Middle Last
Date of Data	Date of Birth Month Day
Place of Birth (State or Orgin country)	Place of Birth (State of foreign country)
Residence Address Street or R. R. City County State	Residence Address (Street or R. R.
Previous Marital Status: Never Married OR	512 Surrybrook, Brown burg. 20
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of high worlding to Date of high worlding t
Other(Specify)	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	Other(Specify)
If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No□ Yes□ 2. Are you afflicted with a transmissible disease? No□ Yes□
3. Are you related to the female applicant closer than second cousin? No. Yes	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? Not Yes Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes No Yes
er to the second	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7 1
dependent children? No□ Yes□	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Harold E. agen	compliance with any court order or orders issued for their support. 8. Full name of father the left to the support.
Residence of father (if deceased so state) Brown being Ond.	Residence of father (if deceased so state no all a second
Birthplace of father (State or foreign country) West Organia	Birthplace of father (State or foreign country
Full maiden name of mother Anice Hogge It	on frie De
Residence of mother (if deceased so state)	Bra. 1
4	Residence of mother (if deceased so state)
State of Indiana. I depose and state the information given	State of Indiana,
County of HENDRICKS Sa: in this application is true and correct.	County of HENDRICKS 88: I depose and state the information given in this application is true and correct.
Signed Dennis a. Com	Signed Clarmen ann Hogue
New Address 512 Sunnybrook Brownshing	New Address 512 Sunnightook Brownsburg
subscribed and sworn to before me this day of Caril 1981	Subscribed and sworn to before the this day of Quil 19.5.
Many for Russellark HENDRICKS Circuit Court	May Ine Russe Olerk HENDRICKS 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 parent	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	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
ounty of HENDRICKS } **:	
Signed Father	Signed Father
Signed Mother	Signed
ubscribed and sworn to before me thisday of 19	Subscribed and sworn to before me this
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	A marriage license having been refused to the above named parties, the
HENDRICKS	irt by Written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
TOTAL CONTINUES	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the
Indiana dated the day of day of	La man a Hoans
Denne a. Dais	M br
with further remembered, the following marriage certificate was fixed in my	anabat cortain that on the
ne thousand nine handard and	Country State of
tate of Indiana, Groom Devine Q Days	County, State of
	LICKIDDICKS
ere by me united in marriage as authorized by a marriage license issued for t	hat purpose by the county

Official Designation

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE 4-6-8)
Date of Application

rm Prescribed By diana State Board of ealth under Authority HENDRICK	AARRIAGE LICESTON SCounty Date of Application
I.C. 31-1-3-2 fective July 1, 1977	FEMALE Medical Examination Report Dated 3-31-8/
MALE 3-31-8	KAILI ZMIOU
	Name of Physician
Name of Physician Ourself Andrews	Name of Physician ever procures the issuance of a license to marry by any false statement, representation or pretered the issuance of a license to marry by any false statement, representation or pretered to the issuance of a license to marry by any false statement, representation or pretered to the issuance of a license to marry by any false statement, representation or pretered to the issuance of a license to marry by any false statement, representation or pretered to the issuance of a license to marry by any false statement.
LL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "Faise scale in all be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Fift Middle Hands
ame First Middle Expter	Date of Birth Month 31 1947
ate of Birth Month Day	Place of Birth (State or) foreign country)
ace of Birth (State or threign country)	ALMA COUNTY COUNTY CALL
City County Sate	Residence Address 245 M. Une Olfd. New Sho
sidence Address Street or R. R. Suchels Warren Sho	Previous Marital Status: Never Married OR
evious Marital Status: Never Married OR	Ended By Death Divorce Annument
st Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
ate of birth verified by: Birth Certificate Judicial Decree	Drueis Secence Spectrus
Other (Specify) Driver Levense Welter	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No No No No No No No No No N
Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed?	2 Are you afflicted with a transmissible disease" No
Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin?
Are you related to the female applicant closer than second cousin: No to Yes No to Yes	4. Are you now under the influence of intoxicating liquor? No 2
Are you now under the influence of industrating liquo. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No 6. List the full names of any dependent children.
List the full names of any dependent children.	6. List the full names of any occasion
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children?
dependent children?	dependent children: If answer is "yes", it is required that this Application be accompanied by satisfactory proof that ye
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court order or orders is fed for their support
compliance with any court order or orders issued for their support. Full name of father Mourn Gafan Cypter	8. Full name of father James Office Flanagan
Ah mayed	Residence of father (if deceased so state)
Residence of father (if deceased so state)	Birthplace of father (State or foreign country) Jamestown & 4.
Birthplace of father (State or foreign country such plants)	Many Surge Lineall
Full maiden name of mother Eldine Augh Califer	9. Full maiden name of mother many strains KY
Residence of mother (if deceased so state) In Splan Splan .	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Bowling Green 49	Birthplace of mother (State or foreign country) Januatour, Ky
State of Indiana, HENDRICKS HENDRICKS I depose and state the information given in this application is true and correct.	State of Indiana. County of HENDRICKS Sas: I depose and state the information in this application is true and on the same and the sam
Stanley of Country of Country	Signed X Sadie Irlanagan
Signed Capter Capter	745 D. Mixe # 2 Uylain
New Address.	New Address
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me this day of HENDRICKS Circu
Clerk HENDRICKS Circuit Court	Clerk HENDKICKS Circu
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one
igns, state facts which render the consent of the other parent unnecessary	
igns, 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, HENDRICKS }ss:	State of Indiana,
Jounty of	County of HENDRICKS S8:
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me this
	day of
HENDRICKS C	JRT. A marriage license having been refused to the above named part
County	Court by written and a '
authorizes and directs the issuance	e of a marriage license to the above named parties.
RETURN OF MARRIAGE TO THE	
aug of Core	
be it further remembered, the following marriage certificate was fled in	and Dadeo & Glassan
, toox	hand
one thousand nine hundred and Si	at Brownship day of County of Hand
State of Indiana, Groom Staphen and Expternance of	of Hand, County of Hand
ana, Briae	County State of
were by me united in marriage as authorized by a marriage license issued for this day of the license issued for the license is th	or that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of Opul	6
, 19	Signed
Filed and recorded in accordance with the laws of the State of Indiana this.	Official Designation & State Can March
the State of Indiana this	15 June 19 19 19 19 19 19 19 19 19 19 19 19 19

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	137
File_	
ap	Date of Application

T. L. C. C.	County County
MALE CON DI 185	Spel 1/98/
MALE Medical Examination Report Dated Copril 6, 1981	
Name of Physician Suver	Medical Examination Report Pated Copiel 5, 1981
OU OUESTIONS MUST BE ANSWERED 10 31-1-3-6 prescribed "Falsy state	Name of Physician A. Julian hoever 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 (\$500,000".	hoever procures the issuance of a license to marry by any falso dot
MALE APPLICANT Middle	any taise statement, representation or pretense
Oscar Toylor May	Name First APPLICANT
Date of Birth Month Pay	Date of Birth Rita Jane Pallage
Place of Birth (State or foreign country)	Day V
Residence Address Segret so R. R. City County	Place of Birth (State or topeign country) 24 1951
Lorral Relivery Omor West 1)a	Residence Address Street or R. R. City
Previous Marital Status Never Married OR	RR#2 Box 169 Danvillo Hendrich State
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulyses D
1 Other (Specify) Diwers Lie	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Drivers Lin 11/0:
Are you now or have you ever been adjudged to be of unaound mind? No Yes O	1. Are you now or have you eyes how all the
If answer is 'yes' has the adjustication been removed? No D Yes D	If answer is "yes" has the adjust.
Are you afflicted with a transmissible disease! No Ves O	2. Are you afflicted with a transmit the
3. Are you related to the female applicant closer than second cousin? No 2 yes 0 Are you now under the influence of intoxicating liquor? No 2 yes 0	3. Are you related to the male and in a
100	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No B Yes O List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above	
dependent children' No 🗆 Yes 🗆	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is 'yes' it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any quart vertier or vertiers insued by their support. Full name of father. Novid Onderson Hale	compliance with any court order or orders issued for their support.
1 0	8. Full name of father Richard Corl Robb
Residence of father of the maners no state is clickased	Residence of father (if deceased so state) Dorwille, Indiana
Birthplace of father i State or foreign country's Usigna	Birthplace of father (State or foreign country) Andions
Full maiden name of mother Forms M& Comos	20, 111 5 1
Residence of mother of decreased so states office agod	9. Full maiden name of mother Mary Ellen We Fur
	Residence of mother (if deceased so state) Nowelle, Bullova
Birthplace of mother State or foreign country). West Ulyina	Birthplace of mother (State or foreign country) Andioxa
tate of Indiana. Ounty of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
ounty of	
Signed CASON T Agel	Signed Rita Jane Robb
New Address DW704 W/a	New Address General Delivery man W. VA 25
abscribed and sworn to before me this 2 day of Office 1981	Subscribed and sworn to before me this. 7 day of Opril 1981
vary fore Russell Gerk HENDRICKS Chronit Court	
Clerk Court	Mary Yore Russell Gerk HENDRICKS Circuit Court
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
e, 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
na state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
tte of Indiana, unty of HENDRICKS } **:	State of Indiana, HENDRICKS ss:
	County of
Signed	Signed
Signed Mother	Signed
scribed and average as a first service of the servi	Subscribed and sworn to before me thisday of, 19
	Clerk
Clerk	
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS	art by written order issued
County dispare the issuance 0	f a marriage license to the above named parties.
authorizes and directs the issuance of	AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Indiana dated the day of day of	10 07. dutitority of the
	R. to) . Roll
it further remembered, the following marriage certificate was filed in my o	ffice, to-wit:
harmond D. sales	hereby certify that of Homa
thousand nine hundred and	at Down Windlester, Country of Hendina
te of Indiana, Groom Oscas D. Hale	County, State of County State of County, State of County, State of County,
Bride A	TENDDICKS
e by me united	
	hat purpose by the Clerk of the Circuit Court of
	and purpose of the
ed al.:	and purpose of the
ed this \\\ day of Opil, 1981	Signed & Raymond Rissler
ed this // day of Opil, 1981	Signed & Raymond Rissler
d and recorded in this day of the state of t	Signed & Raymond Rissler

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	138
File_	42
	4-8-81
-	Date of Application

HENDRICKS _County 4-6-81 FEMALE Medical Examination Report Dated MALE Medical Examination Report Dated. Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretens shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT Date of Birth Date of Birth Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by:

Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify) Mules ficinal 1. Are you now or have you ever been adjudged to be of ur No Yes No Yes 1. Are you now or have you ever been adjudged to be of unsound m If answer is "yes", has the adjudication been removed? No D Yes D No□ Yes□ No Yes 🗆 If answer is "yes", has the adjudication been removed 2. Are you afflicted with a transmissible disease No Yes 2. Are you afflicted with a transmissible disease No Yes D 3. Are you related to the male applicant closer than second cousin No Yes Are you related to the female applicant closer than second cousin No Yes D 4. Are you now under the influence of intoxicating liquor No Yes Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes D No Yes 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children 6. List the full names of any dependent children. 7. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Maxwell Woodward William Mertin Residence of father (if deceased so state) RR2 Doy 137 Residence of father (if deceased so state) Birthplace of father (State or foreign country). Birthplace of father (State or foreign country) 9. Full maiden name of mother_ Residence of mother (if deceased so state) 430 Jubles & Residence of mother (if deceased so state). Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct. State of Indiana, **HENDRICKS** HENDRICKS Signed Wanda of Raberts New Address R. R. 3, Box 120 Danuille HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana. State of Indiana, HENDRICKS County of. HENDRICKS County of .. Signed. Father Signed. Subscribed and sworn to before me this Subscribed and sworn to before me this... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Sufficient # 2 Court by written order issued 3 day Warrier authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... HENDRICKS of Indiana dated the. ., 1951..., authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: a Lee Roberte Raymond hereby certify that on the !! one thousand nine hundred and 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, State of Signed ..

Official Designation.....

.. Circuit Court

HENDRICKS

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

179

110	
T	
File	

MALE Medical Examination Report Dated	4-3-81
Medical Education Charles	J. Hasbrook
Name of Physician Charles	J. Hasprook

4-9-51

MALE Report Dated 4-8-81	Date of Application
Medical Examination Report Dated 4-3-8/ Name of Physician Charles F. Harsh and	FEMALE Medical Examination Report Dated 4-3-8/
Name of The	
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Charles F. Nashrook
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
. First Middle	Name FEMALE APPLICANT
Name Brian Benkum	Ffyst Middle
Date of Birth Month Day Year	Date of Birth Month
Place of Birth (State or foreign country)	Day Year
Residence Address treet or R. R. City County State	State of foreign country)
RRI BEX 291 Blowng Dend Ind	Residence Address Street or R. R. Chyl County State
Previous Marital Status: Never Married OR	as a Souther My holps Marier In
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
De 1 1 1 10 10 11 1	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Drivers Leciuse W/picluse
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	1 Are you now on house
If answer is "yes", has the adjudication been removed?	If answer is "yee" has the all the
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No yes	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any courty order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father John Lee Benkam	compliance with any court order or orders issued for their support. 8. Full name of father harles becald Barnes
Residence of father (if deceased so state) Brownsburg Sed.	
	Residence of father (if deceased so state) Brownsburg Ind.
Birthplace of father (State or foreign country) Blooming ton Ind.	Birthplace of father (State or foreign country) Georgia
9. Full maiden name of mother Januse Ella alean Hoover	9. Full maiden name of mother Francis Great Bagwell
Residence of mother (if deceased so state) Brownsburg Ind.	Re- 10
	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Bloomington Inc.	Birthplace of mother (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.	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
	County of County
Signed X Brian Kent Benham	Signed & Swan Clyn Buries
New Address 2356 Gowdin, Indids, In.	New Address 2356 GOWOLD Dr. JAPPLY
Subscribed and sworn to before me this P day of Opril 1981.	Subscribed and sworn to before me this 9 day of april 1981
	I MA G QUALALO HENDRICKS
Mary and Russell Clerk HENDRICKS Circuit Court	7/1019 Steno Australia Circuit Court
CONCENSES	THE PROPERTY OF CHAPPIAN
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of HENDRICKS
Size 4	SignedFather
SignedFather	SignedMother
Signed	
Subscribed and sworn to before me this	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 COURT	T. A marriage license having been refused to the door mand filed
DENDRICKS	art by written order issued
authorizes and directs the issuance of	f a marriage neems to
CENCE	AND MARRIAGE CERTIFICATE LIENDRICKS
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the Circuit Court
of Indiana distributions the semembered, there was filed in my office a marriage titled	se issued by the clerk of the
of Indiana dated the 13 day of Opril	(and)
Be it further remembered, the following marriage certificate was filed in my of	
I,	hereby certify that the the
thousand	it
State of Lat.	of Hondricks County, State of County, State of Hondricks
and and Groom Shaw Sendam	Hondricks County, State of WENDRICKS
were by me united in marriage as authorized by a marriage license issued for to	that surpose by the Clerk of the Circuit Court of
County. County.	mar par poor - 5
Data I	Signed Glen & Owens
day of John 19.	Signed

Official Designation ..

....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 Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

4-9-81 Date of Application

Effective July 1, 1977	FEMALE Detect 4.9-81
MALE Malical Evanination Report Dated 4-9-8/	Medical Examination Report Dated 477
Medical Examination Report Dated	Name of Physician . 71. Stueister
Name of Physician U. 71. Sociator	never procures the issuance of a license to marry by any false statement, representation or preter
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "Faise statement hall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle glast
Name Wicker & Middle Walker	Date of Birth Month Day Year
Date of Birth Month Day Year 1954	Place of Birth (State or foreign country)
lace of Birth (State or Greign country)	Residence Address Street or R. City County Staty
esidence Address Street or R. R. City County State RR Crawfordsulle Mont,	RR 1 BOX 235N Vittabor De no Ind
revious Marital Status: Never Married OR	Previous Marital Status: Never Married OR
ast Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
ate of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by
Other (Specific) I W. u/ sicture	Other (Specify)
Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Pye
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No Ye 2. Are you afflicted with a transmissible disease.
Are you afflicted with a transmissible disease?	Are you related to the male applicant closer than second cousin No Ye
Are you related to the female applicant closer than second cousin? Are you now under the influence of intoxicating liquor? No Yes	4. Are you now under the influence of intoxicating liquor? No Ye
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Ve
List the full names of any dependent children.	6. List the full names of any dependent children.
Marla Walker	
Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children? No□ Ye
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Full name of father Warw U. Walker	8. Full name of father Salva a symmotics
Residence of father (if deceased so state) Torth Salem, Ind.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Indiana	Birthplace of father (State or foreign country)
Full maiden name of mother Wary W. Klalmon	9. Full maiden name of mother daymon W. Burns
Residence of mother (if deceased so state) Crawforolsville Sao.	Residence of mother (if deceased so state) Sendall Fack, New Jus
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
tentry of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information gives in this application is true and corre
Signed X Michael Walker	0.00
New Address RR Bod 235N GHz/mo-	Signed & TUCCI G. Symmonds
abserbed and sworn to before me this day of april 10	New Address R. R. J. Box 235N Villate
Marit and GINAL HENDRICKS	Subscribed and sworn to before me this day of 19
Circuit Court	Mary Saal Kulster HENDRICKS Circuit Co
NSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
t, 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 pare
ns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	the other parent uniterestly
te of Indiana, HENDRICKS S8:	State of Y
nty of	State of Indiana, County of HENDRICKS
Signed Father	
Signed Mother	Signed Fath
scribed and sworn to before me thisday of19	Subscribed and
	Subscribed and sworn to before me this day of , 19
	Cl
HENDRICKS County ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of RETURN OF MARRIAGE LICENSES	T. A marriage license having been refused to the above named parties, the curt by written order issued and file file marriage license to the control of a marriage license to the control of the control
D.F.	tage license to the above named parties
Be It Remembered, there was filed in my office a marriage li	E AND MARRIAGE CERTIFICATE
Thatana dated the day of day of	Circuit Cou
it further more and and the	, 19 01, authorizing the joining teacther as hysband and wi
Expose H Ham	thee to-roit.
thousand nine hundred and Steep of Indiana, Groom School School School School Steep	hereby certify that on the
te of Indiana, Groom Whichael B. Walk	at Drawnshing day of Jan.
thousand nine hundred and S te of Indiana, Groom S Bride S S S S S te by me united in marriage as authorized by a marriage license in the second s	County State at
te of Indiana, Groom	that County, State of Ord
re by me united in marriage as authorized by a marriage license issued for the ted this day of , 198	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	
ed and recorded in accordance with the laws of the State of Indiana this	Signed Signed H. Hook
with the laws of the State of Indiana this	Official Designation

Circuit Court

STATE OF INDIANA

Health under Authority of 1C. 31-1-3-2 Effective July 1 1977 HENDRICK	MARRIAGE LICENSE File
Elicon	County
MALE Medical Examination Report Dated 3-28-81	FEMALE Medical P
Name of Physician B. Wardhaum	Medical Examination Report Dated 4-6-8/
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "Faise statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician James Black
shall be fined in any sum and MALE APPLICANT	marry by any false statement, representation or pretens
Name First Middle Last	Name First
Date of Birth Month Day Year	Date of Rivel Olyn Last
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Paris
32405 Stankland. Site 104 Salar	Street or R. R. City, County State
Previous Marital Status Never Married B OR Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
A Other (Specify) & wisers fix y sint	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes □	Other (Specify) A. A. Assume
If answer is "yes" has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Yes ☐ No ☐ Yes
2. Are you afflicted with a transmissible disease? No. Yes 3. Are you related to the female applicant closer than second cousin? No. Yes	2. Are you afflicted with a transmissible disease? No V Yes C
4. Are you now under the influence of intoxicating liquor? No 4 Yes 0	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No D Yes D
5. Are you now under the influence of a narcotic drug? No Yes O	5. Are you now under the influence of intoxicating liquor? No V yes C No V yes C
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children' No Ves C	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued, for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are i
8. Full name of father Dange for farmer	8. Full name of father Presented by their support.
Residence of father is f decreased so states & south white	Residence of father (if deceased so state) Pattsford
Birthplace of father i State or foreign country L. M.	Birthplace of father (State or foreign country)
9. Full maiden name of mother pushes M. Melson	9. Full maiden name of mother Tosaline fulks
Residence of mother is if decreased so states	Residence of mother (if deceased so state) Littaliano, Su
Birthplace of mother i State or foreign country 2 200 310 do	Birthplace of mother (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.	State of Indiana. HENDRICKS Sas: I depose and state the information give in this application is true and correct the information give in the same in the information give in the same in the information give in the same
Signed / Herry W. Mourand	Halim Leann Mayon
New Address 32405 FRANKLIN DR SUITE IOU SOULD	New Address 32 405 Franklin Drive Solon
Subscribed and sworn to before me this day of .19.	Subscribed and sworn to before me this
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS Circuit Cour
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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which fender the constitution
State of Indiana,	State of Indiana, The POLICES SS:
County of HENDRICKS 88:	County of
Signed Father	SignedFathe
Signed Mother	Signed Mothe
Subscribed and sworn to before me this day of, 19	Subscribed and sworn to before me thisday ofday of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	of a marriage months
THE WARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Cour
1860 Alt Damentones at a Cladia may affice a marriage ticen	the transfer as husband and will
Rouse Dames Correct a	and Raha Seam Margaran
l,	hereby certify that on the day of day of
thousand	at State of
of Indiana	O state of
and, Bride of authorized by a marriage license issued for County.	County, State of County, State of HENDRICKS
County. County.	that par par
Dated this day of Joul 198	Signed Reasoned Church of Jesus Chief
	Official Designation 1951

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

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1. 1977 MALE Medical Examin. Name of Physicidal ALL QUESTIONS MU shall be fined in any suitable of Birth. Place of Birth Place of Birth (State or form Residence Address 9235 Previous Marital Status: Notes Marriage Ended By: Date of birth verified with a standard of the property o

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

___County

4-10-81 Date of Application

HENDRICKS Circuit Court

	FEMALE 3-/2-8/
MALE Medical Examination Report Dated 3-/2-81	Medical Examination Report Dated 5-12-81
	Name of Physician Showas Jones
Who MINT DE ANSWERED 10' 31-1-3-6 prescribed "False statement - Who	ever procures the issuance of a license to marry by any false statement, representation or pretens
shall be fined in any sum not exceeding five financial	FEMALE APPLICANT
Name Fifst Middle (Last	Name Figst Middle Black.
Vaniel E Egglastir	Date of Birth Month Day Year 1955
Date of Birth Month 13 1954	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. B. Sindples Marion Ind.	8955 E. GOON. Durg Head And
Previous Marital Status: Never Married GOR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by:
Other (Specify) Drivers Lecense	Other (Specify) Drivers dicense
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed? No Yes No Yes No Yes No Yes No Yes	If answer is "yes", has the adjudication been removed" No Yes 2. Are you afflicted with a transmissible disease" No Yes
Z. Mejot amicko	2. Are you afflicted with a translational closer than second cousin? No Yes
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes	4. Are you now under the influence of intoxicating liquor No West
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug. No Yes
6. List the full names of any dependent children.	6 List the full names of any dependent children
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children No ☐ Yes 1
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children" No U Yes U If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are:
compliance with any court of der or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Richard Eugeno Egglester	8. Full name of father Charles Lee Blacker
Residence of father (if deceased so state)	Residence of father (if deceased so state). Brownsburg, In
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Isoliana
9. Full maiden name of mother Margaret May O'Brien	9. Full maiden name of mother Cinolevella alice Wittman
Residence of mother (if deceased so state) Elkhart I.	Dear and
Birthplace of mother (State or foreign country) El though and.	0.1
State of Indiana,	Birthplace of mother (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.	County of HENDRICKS Bas: I depose and state the information give in this application is true and correct
Signed & Canzell. 2gglostor	Signed & Charle Maire Blacker
New Address Darborn, Misk	New Address Dearborn, Michigan
Subscribed and sworn to before me this. A day of Cyril	
More and Pilano OD . HENDRICKS	Subscribed and sworn to before me this 10 day of Clorid 198
Clerk Circuit Court	1 V ary Jame Russellaerk HENDRICKS Circuit Cour
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
	title consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS
SignedFather	County of HENDRICKS
Signed	Signed Father
Subscribed and sworn to before me this day of , 19	Signed Mother
	Subscribed and sworn to before me this day of ,19
COMPLETE	
HENDRICKS LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
County	urt by written order is a large been refused to the above named parties, the
authorizes and directs the issuance o	f a marriage liganes to the same transfer of the sa
RETURN OF MARRIAGE LICENSI of Indiana dated the day of day	se issued by the clerk of the
DANIEL E. EGGLESTON	, 198 authorisis de la contra Curcuit Court
of Indiana dated the	nd. CHARLA M. BLACKER
I, WILLIAM A. PAPPANO one thousand nine hundred and 81 State of Indiana, Groom DANIEL E. EGGLESTON and, Bride CHARLA M. BLACKER	hereby certify at
State of Indiana, Groom DANIER 7	at BROWNSBURG 23rd day of MAY
State of Indiana, Groom DANIEL E. EGGLESTON and, Bride CHARLA M. BLACKER were by me united in marriage as authorized by a marriage license in	of MARION County of HENDRICKS
and, Bride	HENDRICKS County, State of IN
County.	that purpose by the Clark County, State of IN
were by me united in marriage as authorized by a marriage license issued for a County. Dated this 23rd day of MAY , 19 81	the Clerk of the Circuit Court of HENDRICKS
Filed and recorded in accordance with the laws of the State of Indiana this	Signed /S/ WILLIAM A. PAPPANO Official Designation CATHOLICA
of the State of Indiana this	11th day of MAY
Have I have Committee of the Committee o	Signed Share 2 19 89
	Clerk

.Clerk

.Circuit Court

-	
Form Prescribed By	
Form Cinta Board of	
Form Prescrition Board of Indiana State Board of	
the lib under	
of I.C. 31 July 1, 1977	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

	143
No	170

No.	W.
T	

Effective July 1, 1944	County File
	Date of April 11
MALE Medical Examination Report Dated 3-25-8/	PEMALE
Name of Physician Mudall J. Jones, U.S.A.F.	Medical Examination Report Dated 7-2-18/
Name of Fright ANSWERED 1C 31-1-36 proceeded at 1	Name of Physician Manual Andles
ALL QUESTIONS MUST be also statement who wall be fined in any sum not exceeding five hundred dollars (8500,000".	ever procures the issuance of a license to marry by any false statement/representation or pretense
MALE APPLICANT	
Name First Middle Last	Name First
Date of Birth Day Year	Date of Birth Months Male Field
Place of Birth (State or fyreign country)	Day Year
A let 1	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street or R. R.
Upt hat total on the second of the	356 71. Center Alanhill State
Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment O	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate U Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) the true L. D.	Other (Specific)
1. Are you now or have you ever been adjudged to be of unsound mind? No BYes D	1. Are you now or have you goes here it is a second of the
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes
2. Are you afflicted with a transmissible disease? No P Yes D	2 Are you afflicted with a transmissible to
3. Are you related to the female applicant closer than second cousin? No D Yes D	No 1es
4. Are you now under the influence of intoxicating liquor? No S Yes	4. Are you now under the influence of intoxicating liquor? No Yes 1
5. Are you now under the influence of a narcotic drug? No Ves D	5. Are you now under the influence of a narcotic drug? No 2 Yes 2
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	The state of the s
7. Are you required by any court order or orders to support the above dependent children No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their suppose;	compliance with any court order of orders issued for their support.
8. Full name of father flue of cleaning	8. Full name of father Talest V. Feelds
Residence of father (if deceased so state) Holy .	Residence of father (if deceased so state) More equille, In
Birthplace of father (State or foreign country)	(, 2, 1)
X Daniel	Birthplace of father (State or foreign country)
9. Full maiden name of mother	9. Full maiden name of mother / family + flynn
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Helden files
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana,	State of Indiana, I denote and state the information given
County of HENDRICKS in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
signed the B. Qucher	Signed Melinaa M. Dieldo
New Address AFT 8 N. PINE GARDENS JAY ARK	New Address apt & D. Pine Wardens 40
1/ 1/ 1/	
Subscribed and sworn to before me this day of 1921.	Subscribed and sworn to before me this day of HENDRICKS Grant Court
HENDRICKS Circuit Court	The first Clerk Circuit Court
CONCENS	THE PARTY OF CHAPPIAN
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS	State of Indiana, HENDRICKS ss:
County of HENDRICKS	County of
Signed	Signed
Signed Mother	Signed Mother
Subscribed and average of the subscr	Subscribed and sworn to before me thisday of, 19
	Subscribed and Clerk
Clerk	The state of the s
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
Cat	and by written order issued
in authorizes and directs the issuance of	f a marriage license to the above named parties.
Topics Topics	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the
of Indiana dated the day of	se issued by the clerk of the
De Jake C. Oral day of	nd Melenda III. Color
Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit:\ an of Opportunity
	nereog certify
shousand nine hundred	at County, State of
State of Indiana, Groom John & Orglos	of the State of
and, Bride of	HENDRICKS HENDRICKS
were by me united in marriage as authorized by a marriage license issued for t	hat purpose by the Clerk of the Circuit Court of
Dated this.	Signed Down O. Cari
Dated this 26 day of Open 1981	Signed
	SI Martin

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

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

4-10-81 Date of Application

HENDRICKS

... Circuit Court

ffective July 1, 1977	FEMALE Papert Dated 4-10-81
MALE 4-1081	Medical Examination Report Dated Name of Physician David Naggard
MALE Medical Examination Report Pated 4-108 Name of Physician Variety	Name of Physician
Name of Physician Name of Physi	ver procures the issuance of a license to marry by any faise statement, representation or preten
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 preservices and like fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name Circle Middly Last
ame First Middle Bunch	Date of Birth Month 8
ate of Birth Month Day Year (950)	Place of Birth (State or foreign country)
lace of Birth (State or forgign country)	Residence Address Street & R. R. City County State
esidence Address Street or R. R. City County State	2525 auon Rd. Defet Hend. And
2825 avontal type	Previous Marital Status: Never Married OR
revious Marital Status: Never Married OR	Marriage Ended By: Death Divorce Annuiment
ast Marriage Ended By: Death Divorce Annulment Late of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Writer Sicense
Other (Specify) Drivers Siceral	1. Are you now or have you ever been adjudged to be of unsound mind? No WYes
Are you now or have you ever been adjudged to be of unsound mind? No yes If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No Yes
No E res -	2. Are you afflicted with a transmissible disease? No 7 Ye 3. Are you related to the male applicant closer than second cousin? No 7 Ye
Are you arriced with a transmission of the female applicant closer than second cousin? No Yes \(\text{No } \text{Yes} \(\text{V} \)	Are you now under the influence of intoxicating liquor? No 2 Yes
Are you now under the influence of intoxicating liquor:	5. Are you now under the influence of a narcotic drug? No Ye
6. Are you now under the influence of a narcotic drug?	6. List the full names of any dependent children.
5. List the full names of any dependent children. Callen Rost. Burch	Christina Del Humphily
puren cope. anno	Umy Lence Humphrey
	Roger Dale Humphrey
and a support the above	7. Are you required by any court order or orders to support the above
Are you required by any court order or orders to support the above dependent children?	dependent children? No W Y If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you a
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	ompliance with any open order or orders issued for their support.
compliance with any court order or orders issued for their support. B. Full name of father Honold Low Sunch	Fill rame of lather Gleriura Chas. Swyman
Carlos Incl	Residence of father (if deceased so state) Sangel
Residence of father (if deceased so state) Righthylace of father (State or foreign country) Bowling Green Ky	Birthplace of father (State or foreign country) Indeed Ind
Mariana Paris Charles	Traveris Cours Of this
9. Full maiden name of mother	9. Full maiden name of mother Danville Ind
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Sulphi Incl.	Birthplace of mother (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.	State of Indiana. County of HENDRICKS State of Indiana. HENDRICKS State of Indiana. I depose and state the information in this application is true and county of the indiana.
VDal. a. Bul	Von Par Ly Langhi
New Address 2525 avon Rd	Signed Strate & Day of
	New Address 2525 Clubs 4d.
Subscribed and sworn to before me this day of CAPALL 1961.	Subscribed and sworn to before me this day of LUCA CO.
They Jane Kusself Clerk HENDRICKS Circuit Court	Mary Deal Russelfin HENDRICKS Circuit
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one p
signs, state facts which render the consent of the other parent unnecessary	
	signs, state facts which render the consent of the other parent unnecessary
Seat of Indiana	
State of Indiana, County of HENDRICKS ss:	State of Indiana, County of HENDRICKS } ss:
Signed Father	SignedF
Signed Mother	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLUMN	URT. A marriage license having been refused to the above named parties
	Court by muitten 1
in Club Office authorizes and directs the issuance	e of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE gense issued by the clerk of the HENDRICKS Circuit
aug of Capaci	10 87
Be it further remembered, the following marriage certificate was filed in my	and and authorizing the joining together as husband and
1, Revi Kenneth & Jetter Was filed in my	office, to-wil.
I, Serveth E. Setters one thousand nine hundred and S	hereby certify that on the 10 day of ago
State of Indiana, Groom Dole De Dungh	County of House
and Bride enry a	
County.	of County, State of Cou
were by me united in marriage as authorized by a marriage license issued for Dated this day of , 19.7	or that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19).\
Filed and recorded in accord	Official Designed Kerneth & Watter
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Posts

Form Prescribed By
Health under Authority of I.C. 31-1-3-2
of I.C. 31 July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

	2%
No 14/5	
File	
4-18-81	
Date of Application	
ated 3/27/8/	
amila Samel	
by any false statement, representation or pretense	
APPLICANT Middle	
Day Year	
Jul 1959	
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A STATE OF THE PARTY OF THE PAR	
Annulment U Judicial Decree	
License Epictual	
to be of unsound mind?	
emoved? No Yes No Yes No Yes No	
nan second cousin?	
drug? No → Yes □	
Mark Spills Spills Spills	
to support the above $$N_0 \ \square \ Y_{es} \ \square$$	
cation be accompanied by satisfactory proof that you are in sed for their support.	
Carwell	
Varley Kentrake	
la lecles	
Danielle Such	
Clarkson, Kentucky	
sa: I depose and state the information given in this application is true and correct.	
sa M. Carwile	
3 day of April 18	
ALL Clerk HENDRICKS Circuit Court	
ARDIAN	
re consent for this marriage. If only one parent	
f the other parent unnecessary	
58:	
Father Mother	
Father	
Father Mother	
Father Mother day of 19 Clerk used to the above named parties, the	
Father Mother day of , 19	
Sed to the above named parties, the and filed parties. HENDRICKS Circuit Court joining together as husband and wife	
Tather Mother 19	
Mother	

HENDRICKS _County MALE Medical Examination Report Dated 3/27/81 FEMALE Medical Examination Report D Name of Physician Ludmila Frammo ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry the fined in any sum not exceeding five hundred dollars (\$500,000". Name of Physician_ MALE APPLICANT FEMALE Previous Marital Status Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married O Last Marriage Ended By: Death □ Divorce Date of birth verified by Birth Certificate Judicial Decree Date of birth verified by: D Birth Certificate Other (Specify) Druces 1. Are you now or have you ever been adjudged to be of unsound mind! 1. Are you now or have you ever been adjudged If answer is "yes", has the adjudication been removed? If answer is "yes", has the adjudication been 2. Are you afflicted with a transmissible disease? 2. Are you afflicted with a transmissible disease 3. Are you related to the female applicant closer than second cousin! 3. Are you related to the male applicant closer t you now under the influence of intoxicating liquor? 4. Are you now under the influence of intoxicati 5. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of a narcotic 6. List the full names of any dependent children. 6. List the full names of any dependent children 7. Are you required by any court order or orders to support the above Are you required by any court order or order No□ Yes□ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Appli Full name of father_ Residence of father (if deceased so state) Birthplace of father (State or foreign country)_ Full maiden name of mother Meuro Residence of mother (if deceased so state). Birthplace of mother (State or foreign country Birthplace of mother (State or foreign country)_ State of Indiana, HENDRICKS State of Indiana. HENDRICKS Signed X Mele New Address ZO 83 CONSENT OF PARENTS, PARENT OR GUARDIAN CONSENT OF PARENTS, PARENT OR GU We, the parents, of this applicant hereby give consent for this marriage. If only one parent We, the parents, of this applicant hereby give signs, state facts which render the consent of the other parent unnecessary..... signs, state facts which render the consent HENDRICKS HENDRICKS County of ... County of Father Mother 1981. Mary Jane Russell COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refuCourt by written order issued...... .County. authorizes and directs the issuance of a marriage license to the above named RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the... day of april and Molissa K. future & Surper Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, hereby certify that on the hereby certify that on the one thousand nine hundred and State of Indiana, Groom Could & es of House 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 .. 18 day of Qq. 1981. Official Designation

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

.....day ofClerk Signed Signed HENDRICKS Circuit Court

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STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Date of Application

Health under Authority HENDRIC	MARRIAGE LICENSE KSCounty File
Effective July 1, 1977	FEMALE Separt Dated 4-7-8/
MALE 4-7-8/	Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician
Name of Physician What and the statement - Wh	oever procures the issuance of a license to marry to any false statement, representation or pretense FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERELY, J.C. 31-1-3-6 prescribed hall be fined in any sum not exceeding five hundred dollars (\$500,00)".	
MALE APPLICANT	Name Figst angest Middle, (Last,
ame Front Middle	Date of Birth Month Day Year
Pate of Birth Month Day Year	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address, Street or K.R. City County Softe
Residence Address Street of R. R. City County State	Sulur lan Att. Amullo In.
(Suburbas War Williame Sa	Previous Marital Status: Never Married OR
revious Marital Status: Never Married OR ast Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Divorce Annulment
ast Marriage Ended By: Death Stronger Amountain Decree	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Not because
Other (Specify) A Charles No Ves -	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
Are you now or have you ever been adjudged to be of unsound mind? No Pres	If answer is "yes", has the adjudication been removed? No Yes C
Are you efflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes C 3. Are you related to the male applicant closer than second cousin? No Yes C
No La Yes L	Are you related to the male applicant closer than account to the second se
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of a narcotic drug? No P Yes C
Are you now under the influence of a narcotic drug:	6. List the full names of any dependent children.
List the full names of any dependent children.	
	7. Are you required by any court order or orders to support the above
Are you required by any court order or orders to support the above dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
3. Full name of father Coll for the Coll for	8. Full name of father Martiella Ku
Residence of father (if deceased so state) // Sungifield (1)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Muse Wyatt	9. Full maiden name of mother SHA
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) alleged
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS 88: Idepose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Section 1 Section 2 Sectin 2 Section 2 Section 2 Section 2 Section 2 Section 2
County of Park Park	County of Markets of A 1 4 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Signed Signed	Signed I far gare w. walls
New Address @ Suburban Hr Appwelle	New Address 6 Affiliation
Subscribed and sworn to before me this day of Mills 19	Subscribed, and sworn to before me this day of day of 1904
Clerk HENDRICKS Circuit Court	Was from Tussell Clerk HENDRICKS Circuit Cour
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
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
igns, 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, HENDRICKS ss:	State of Indiana,
county of	County of HENDRICKS ss:
Signed Father	SignedFath
Signed	SignedMoth
Subscribed and sworn to before me thisday of, 19	
	Subscribed and sworn to before me thisday of
HENDRICKS COUNTY (A TYPE OF COL	JRT. A marriage license having been refused to the above named parties, the
in Clarks authorized and live of	Court by written order issued 3 MM WMWL and file
directs the issuance	e of a marriage license to the above named parties
of Indiana dated the day of	ceruse issued by the clerk of the HENDRICKS Circuit Cou
Be it turbes are all M. Penny	and 198/, authorizing the joining together as husband and wi
I Sterow Rarriage certificate was filed in my	y office, to-wit: () () () () ()
one thousand nine hundred and	whereby certify that on the day of Open
State of Indiana, Groom	at Surely day of Hold
1 mil M	of County State of Ond
and, Bride 12 almose to, (1) a bo	ounty, State of
were by me united in marriage as authorized by a married in	County State of Jud.
County. County.	or that purpose but the Claim County, State of
were by me united in marriage as authorized by a marriage license issued for the county. Dated this day of , , 19	or that purpose by the Clerk of the Circuit Court of HENDRICKS
one thousand nine hundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for the county. Dated this day of , , 19. Filed and recorded in accordance with the laws of the State of Indiana this	or that purpose by the Clerk of the Circuit Court of HENDRICKS Signed

Form Prescribed By
Indiana State Board of
Health under Authority
110 31 142
Effective July 1 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

	1.17
No	147
File	

Circuit Court

MALE U-111 ~	
MALE Medical Examination Report Dated Name of Physician Aurid Maggard	FEMALE Date of Application
Name of Physician Naved Haggard	Medical Examination Report Dated 4-14-81
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False states"	Name of Physician David Haggard hoever procures the issuance of a license to marry by any false statement, representation or pretens
shall be fined in any sum and exceeding five number dollars (\$500,000".	hoever procures the issuance of a license to marry be any fel
Name First 44 Mighte	by any talse statement, representation or pretens
Date of Birth Month Day Surenew	Name First
15 lear	Date of Birth Sandra Middle Last
Place of Birth (State or forgen country)	Day Ogner
Residence Address Secret of R. R. Sity Manty Ante-	Place of Birth (State or topeign country) 18 Year 1960
The state of the said.	Residence Address Street or R. R. S. S. Sounty O State
Previous Marital Status. Never Married OR Last Marriage Ended By. Deiath Divorce Annulment O	all met wir flesh de de de
Date of birth verified by Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR
	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Vother Specity Drivers License Specture	
1. Are you now or have you ever been adjudged to be of unsound mind. No W Yes D	Other(Specify)
If answer is "yes" has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No Tyes
2. Are you afflicted with a transmissible disease?	yes has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No P yes D Are you now under the influence of intoxicating liquor?	2. Are you afflicted with a transmissible disease? No Yes
No Very	* Are you now under the influence of interior
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No D Yes D	7. Are you required by any court order or orders to support the above
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	No Vac
compliance with any count order pe prefers issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father. ROSE a Severage	compliance with any court order or orders issued for their support. 8. Full name of father Can P. Jyner
Residence of father sif decreased so states.	Residence of father (if deceased so state) Blainfield Ind
Birthplace of father i State or figuring organismy is supple and	
9. Full maiden name of mother Maria Lee Wilnes	Birthplace of father (State or foreign country) Insteams
Residence of mother oil decorated in status. North Salem Sel	9. Full maiden name of mother Vriscella May Figure
CO 1 A	Residence of mother (if deceased so state) Playafield Sid
State of Indiana.	Birthplace of mother (State or foreign country) Scioliana
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
x Score de la constante	
Signed Not xumerely	Signed X Sandra L Syner
Now Address forth Salam, Van	New Address North Salem In.
Subscribed and sworn to before me this T day of upril 101.	Subscribed and sworm to before me this day of Upril 198
Thary are Kuskell Clerk HENDRICKS Cleruit Court	Mary and Coursell Clerk HENDRICKS Circuit Court
CONSTRUCTION	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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS se:	State of Indiana. County of HENDRICKS ss:
Signed	
Signed Mother	Signed Mother
Subscribed and sworn to before me this day of	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IE MADRIA	to license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	t by written order issued
County	t by written order issued
	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
of Indiana dated the	1951, authorizing the joining together as husband and wife
Scott 8 day of Walt	Soudia & Syries
Be it further remembered, the following marriage certificate was filed in my office	to to the
real Cours	reby certify that on the day of day of County of Lower,
one thousand nine hundred and SI	
of Indiana Green	County, State of County
and, Bride Sandia Dina doj	
County. Were by me united in marriage as authorized by a marriage license issued for that	it purpose by the Clerk of the Circuit Court of
Dated this	- ? and C. Davis
day of Opril, 19	Signed
Filed and	icial Designation , 1981
Filed and recorded in accordance with the laws of the State of Indiana this	and day of Clerk
Si	gned HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

LC 31-1-3-2	HENDRICKS	ARRIAGE LICENSE	Date of Application
ffective July 1, 1977		FEMALE	121
MALE W - 8		Medical Examination Report	
MALE Medical Examination Report Dated		Name of Physician	Carlei U drawak
Name of Physician Manual Vision	2	the issuance of a liverise to mar	ry by any false statement, representation or m
TO A NEW EDED 1.C 31-1-3-6 prescribed	"False statement	er procures the taskage	
hall be fined in any sum not exceeding its		1 22,550	
MALE APPLICANT Middle	Last	Name First	Middle Calle
Tame First Madde	- elsow	Date of Birth Month	Day Year
ate of Birth Month Day	Year	Place of Birth (State or foreign country)	2 (1)
Place of Birth (State or foreign country)		Breeze	· ball altea
esidence Address Street & R. R. City Coun	nty State	Residence Address Street or R. I	City County Sta
bul alleration PPI xa B	-	, a d	OR
revious Marital Status: Never Married 9 OR		Previous Marital Status: Never Married A. Last Marriage Ended By Death Divorce	Annulment D
ast Marriage Ended By: Death Divorce Annulment		Date of birth verified by Birth Certificate	Judicial Decree
ate of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by	
Av. aid esseed France	rtsie	Other (Specify)	
Other (Specify)	No P Yes	1. Are you now or have you ever been adjudge	d to be of unsound mind? No
Are you now or have you ever been adjudged to be of unsound mind?	No□ Yes□	If answer is "yes", has the adjudication been	
If answer is "yes", has the adjudication been removed? Are you afflicted with a transmissible disease?	No \$ Yes□	2. Are you afflicted with a transmissible disease	
Are you related to the female applicant closer than second cousin?	No ♥ Yes□	3. Are you related to the male applicant closer	
Are you now under the influence of intoxicating liquor?	No R Yes□	4. Are you now under the influence of intoxica	
Are you now under the influence of a narcotic drug?	No D Yes D	5. Are you now under the influence of a narcol	
List the full names of any dependent children.		6 List the full names of any dependent children	PR.
T. M. BANK			
		A Annual Control of the Control of t	ors to suppose the shows
Are you required by any court order or orders to support the above dependent children?	No □ Yes □	7 Are you required by any court order or order dependent children"	ers to support the above $N_0 \square$
If answer is "yes", it is required that this Application be accompanied by satisfact	ory proof that you are in	If answer is "yes", it is required that this App	plication be accompanied by satisfactory proof that yo
compliance with any court order or orders issued for their support.		compliance with any court order or orders is	ssued for their support.
Full name of father Benderd Wall		8 Full name of father	seilla
Residence of father (if deceased so state)	· le	Residence of father (if deceased so state)	. Andersonallit
Birthplace of father (State or foreign country) Rale And			2.0-
12 M 5 D	CD 14	Birthplace of father (State or foreign country)	
Full maiden name of mother	Jan Merce	9 Full maiden name of mother	in the said
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	bull perhauters
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country	Ky O O
tate of Indiana, HENDRICKS Sa: I depose and state the in this application is		State of Indiana,	I depose and state the information
ounty of ILINDRICKS	is true and correct.	County of HENDRICKS	in this application is true and o
Signed X Dot I Wall		Size V De	sullas un
New Address P.O. Box 199 COAT	ESVILLE	New Address	Son 199, Coate
ubscribed and sworn to before me thisday of	12 et . Chic		0,1
Many Jan Russ Clark HENDRIC		Subscribed and sworn to before me this	14 day or Spell 1
Clerk TILI VDKIC	Circuit Court	Many Jone Kur	Clerk HENDRICKS Circuit
ONSENT OF PARENTS, PARENT OR GUARDIAN			
		CONSENT OF PARENTS, PARENT OR	GUARDIAN
Ve. the parents, of this applicant hereby give consent for this marriage		We, the parents, of this applicant hereby	give consent for this marriage. If only one
gns, state facts which render the consent of the other parent unnecess	ary	signs, state facts which render the conser	nt of the other parent unnecessary
	A STATE OF THE STA		
			The same state of the same sta
			A CONTRACTOR OF THE CONTRACTOR
ate of Indiana,			
ounty of HENDRICKS ss:		State of Indiana,)
		County of HENDRICKS	} %8:
Signed	Father	Signed	
Signed	Mother		The state of the s
obscribed and sworn to before me thisday of	10	Signed	Control of the Contro
	. 19	Subscribed and sworn to before me this	day of
	Clerk		
OMPLETE IF MARRIAGE LICENSE ISSUED BY O HENDRICKS County	ORDER OF COURT		The state of the s
HENDRICKS County authorizes and di	Con-	A marriage license having been	refused to the above named partie
authorizes and di	rects the issuance of	t by written order issued	an
authorizes and di	Des the issuance of a	a marriage license to the above nam	ned parties.
The At Remembers 11	THE LICENSE	AND MADDELS	
The state of the state was filed in my at			
		, 198/ authorisis	he initial to the and and
	7.44	, authorizing t	ne rorning together as husbana and
e it further remembered, the following		Jane Call	y conting to getter the
e it further remembered, the following marriage certificat	e was filed in my off	and I will be a second of the	
e it further remembered, the following marriage certificat	e was filed in my off	and I will be a second of the	
e it further remembered, the following marriage certificat	e was filed in my offic	reby certify that on the	day of Dail
e it further remembered, the following marriage certificat the thousand nine hundred and that of Indiana, Groom	e was filed in my office	reby certify that on the	day of County of County
e it further remembered, the following	e was filed in my office	reby certify that on the	day of County of The

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

Official Designation

Signed \

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

No. 149	
The state of the s	Marie And American
File	1
Date of Appl	
ort Dated 4-8-81	BANK
uch M. Castilly	- curl
THE RESERVE THE PARTY OF THE PA	1110
marry by any false statement, represen	tation or pretense
TALE APPLICANT	
Middle La	lvan)
Day 1 / 90 / 190	ear 62
rd In.	
hard St. Portage	State on.
OR OR	the second
orce Annulment D	PT Sursell lead to
outrial Decree	
udged to be of unsound mind?	N. D. T.
been removed?	No Ves O
lisease?	No D Yes D
loser than second cousin?	No Yes D
arcotic drug?	No Yes O
ildren.	
orders to assess at the latest and the same at the sam	
orders to support the above	No□ Yes□
Application be accompanied by satisfactory pers issued for their support.	proof that you are in
Valgran)
Portage In.	Miles of Res
try) Indiana	Strategicker -
tricia Th. Ga.	nundo
Gast Chicago	In _
ntry Meago, M.	
ss: I depose and state the ir in this application is to	rue and correct.
Leronica Dalun	n
15 Ruchard St Portag	go Inel
. 14th day of April	L , 1981
USSELL Clerk HENDRICKS	Circuit Court
OR GUARDIAN	Ine Property
eby give consent for this marriage. If	only one parent
nsent of the other parent unnecessary	
nsent of the other parent unnecessary	
nsent of the other parent unnecessary.	
nsent of the other parent unnecessary	
nsent of the other parent unnecessary.	Father
sent of the other parent unnecessary.	Mother
nsent of the other parent unnecessary.	Mother
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sent of the other parent unnecessary. ss: day of	Mother
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sent of the other parent unnecessary. Section Secti	Mother
ss: Ss: day of	mother 19 Clerk parties, the and filed Circuit Court and and wife
sent of the other parent unnecessary. Section Section Section	mother 19 Clerk parties, the and filed Circuit Court and and wife

HENDRICKS

.....Clerk Circuit Court

MALE // 20 C/	Patr 64 W
Medical Examination Report Dated 7-8/	FEMALE Date of Application
Name of Physician C. R. Kelley	Medical Examination Report Dated 4-8-81
Hame of the	Name of Physician Danuel M. Castillo MD.
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,000". MALE APPLICANT	ever promoved in the last the man was a series of the last the las
MALE APPLICANT	the issuance of a license to marry by any false statement, representation or pretoned
Pinet Mine	
Brian W. Last	Name First First
Date of Birth One / Year	(Que mina) Middle W Last
Place of Birth (State or foreign country) 1960	Date of Birth Month Day Year
Doslon, Rass	Place of Birth (State or foreign country) 1962
Residence Address Street or R. R. OCity County State	Residence Add Hammond In.
July duckong	3795 Street or R. R. City County State
Previous Marital Status. Never Married OR	Province Victoria St. Polage Son.
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Other (Specify) I. Y. C. J. D. Cond	Date of birth verified by: Birth Certificate Judicial Decree
	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No ✓ Yes □	
If answer is "yes", has the adjudication been removed? No□ Yes□	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Ye
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with
3. Are you related to the female applicant closer than second cousin? No Yes No Yes	2. Are you related to the attansmissible disease?
4. Are you now under the influence of intoxicating liquor? No yes -	3. Are you related to the male applicant closer than second cousin? No Yes Are you now under the influence of the second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No Yes No Yes
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No P Yes D
Tahana Marie Letica I month	6. List the full names of any dependent children.
1 CONTRACTOR	
	THE RESERVE THE PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLU
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Donald R. Lelica	8. Full name of father South . Lalvan
Residence of father (if deceased so state) Jako Co. Andiana	Last.
	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Indiana
9. Full maiden name of mother Josef Jirda Barrad	9. Full maiden name of mother Patricia M. Edmunds
Residence of mother (if deceased so state) Labe Co. Incliona	Bat Alain
Mesidence of mother (if decreased so state)	Residence of mother (if deceased so state) QUIL SUCRE SUCRES
Birthplace of mother (State or foreign country) Conada	Birthplace of mother (State or foreign country) (Magazia)
State of Indiana. HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed Brugen Lateria	Signal X 1 Seroxica Gracigan
	DIRITED
New Address	New Address 2795 Ruland It Patago Incl
Subscribed and sworn to before me this 13 day of May 1981	Subscribed and sworn to before me this
Many Your Pussell Clerk HENDRICKS Circuit Court	Mary ane Kussell Clerk HENDRICKS Circuit Court
Circuit Court	of formation of the 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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana,
County of HENDRICKS ss:	County of HENDRICKS
Signed Father	Signed
Signed Mother	Signed
	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this	Clerk
Clerk	OF THE PERSON NAMED IN COLUMN TO THE
COMP	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	. A marriage license having been resulting and filed
HENDRICKS County Cou	rt by written order issued
n authorizes and directs the issuance of	a marriage license to the above named parties.
TO LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage license	e issued by the clerk of the Circuit Court
I Indiana dated the 13 day of More	19.6.1, datitor
Be it further remembered, the following marriage certificate was filed in my off	ice to-wit:
the following marriage certificate was filed in my of	day of day of
ne thousand	County of County of
ne thousand nine hundred and state of the st	County, State of
of Indiana, Groom Sien Steen	County, State of,
	MENIDDICKS
00ra 1.	at the Circuit Court of
or me united in marriage as authorized by a marriage license issued for the	at purpose by the Clerk of the Circuit Court of
County,	at purpose by the otom of
ounty. Outed this day of day of 198	at purpose by the otom of
ated this day of any 1981	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. 150
File 42
Date of Application

HENDRICKS

... Circuit Court

MALE 5	FEMALE Medical Examination Report Dated 7-2-8
MALE Medical Examination Report Dated Name of Physician	Name of Physician
Name of Physician	pever procures the issuance of a license to marry by any false statement, representation or pretention of pretenti
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed T and shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name Bristophey Middle	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)	What - all
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State R. R. Residence Address
783 30. Cross Danvello	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
	Deter (Specify) Down of pink of pink
Other (Specify) No Yes \(\text{No there you now or have you ever been adjudged to be of unsound mind?} \)	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No 🗓 Y Are you related to the male applicant closer than second cousin? No 🗒 Y
Are you related to the female applicant closer than second cousin? No Yes No Yes	3. Are you related to the male applicant closer than second cousin? No 10 Y 4. Are you now under the influence of intoxicating liquor? No 14 Y
Are you now under the influence of intoxicating liquor? No Yes Yes	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	Swan Betty
	Du William
	Acade.
. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No 🗆 Y
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you a
compliance with any court order or orders issued for their support. Full name of father	compliance with any court order or orders issued for their support. 8. Full name of father William W. Full name of father will a support to the support of
Residence of father (if deceased so state)	
Birthplace of father (State or foreign country)	Residence of father (if deceased so state)
Full maiden name of mother and a law a	Birthplace of father (State or foreign country)
at the	9. Full maiden name of mother Bolty W. Fugl
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
County of HENDRICKS Ba: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sas: I depose and state the information g in this application is true and corr
a NZ la mai a constant	
Signed 7 lenning Harfer New Address 79 3 5 Cray	Signed Wilmetta to ally
Subscribed and sworn to before me this day of Jan 198	New Address 783 Son Capous It.
Manager B. Co. Manage	Subscribed and sworn to before me this day of day of 19.
Clerk HENDRICKS Circuit Court	Many Jane Reveal Gerk HENDRICKS Circuit C
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 parent	
igns, 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 parents of the following sizes at the following siz
	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana,	
County of HENDRICKS ss:	State of Indiana,
Signed	County of HENDRICKS ss:
Father	SignedFa
Signed	SignedMo
ubscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 19.
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County	
HENDRICKS County COUR	T. A marriage license having been refused to the above named parties,
authorizes and directs the issuance of	ourt by written order issued and and a marriage license having been refused to the above named parties, and a marriage license having been refused to the above named parties,
Drawin	marriage license to the above named parties
Be It Remembered, there was filed in war To	E AND MARRIAGE CERTIFICATE
f Indiana dated the day of day of a marriage licen day of a lemma a left further remembered, the following marriage certificate was filed in my of the following marriage was filed in my of the following m	nd 19.01., authorizing the joining together as husband and
Jones E. Miller	fice, to-wit:
ne thousand nine hundred and 8	hereby certify that on the
tate of Indiana, Groom Flaming Hazar	at Irdolo day of County of Brion
nd, Bride Constant Consumation	of Hand County of Marion Lanke County, State of And
ounty.	Country State of VIO
Dated this day of 198	purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	*****
illed and magnided in	Official D. Signed James & Moles
iled and recorded in accordance with the laws of the State of Indiana this	Official Designation

APPLICATION FOR MARRIACI

of I.C. 31-1-3-2 Effective July 1, 1977 HENDRICK	MARRIAGE LICENSE File_
Flictory	County 4-15-81
MALE Medical Examination Report Pated 4-13-81	FEMALE Date of Application
Medica	Medical Examination Report Dated 4-13-81
Name of Filysterate	
ALL QUESTIONS MUST BE ANSWERED 1.1. 31-1-3-h prescribed "False statement—Who hall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation or pretense
Name Pared Galdle Garwood	Name First Management of the Prince of the P
Date of Birth Year 19cs	Date of Birth Lugene Middle Preven
Place of Birth (State or toreign country)	Place of Birth (State or foreign country) 10 1954
Residence Address Street or R. R. Sity County State	Verre Hay to Ino
210 11. Start Deling Hener Oxid	Residence Address Street or R. R. Sity County State State Line State
Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Ves	Other(Specify)
1. Are you now or have you ever been adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes □	3. Are you related to the male applicant closer than 1
4. Are you now under the influence of intoxicating liquor? No Yes O	4. Are you now under the influence of intoxicating liquor? No Yes
Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court-order or orders is select for their support. 8. Full name of father. Oud of a farwood	compliance with any court order or orders issued for their support.
B	8. Full name of father Games Keeves
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Thany a	9. Full maiden name of mother Meresa Beneulus
Residence of mother (if deceased so state) Drownsburg Ind	Residence of mother (if deceased so state) Lerge Haute Soi,
Birthplace of mother (State or foreign country).	Birthplace of mother (State or foreign country) Jerre Hauto Ine
State of Indiana. County of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
() 10 A/ 1	Lugare M Reeve
Signed Frank & Generally	Signed 207 Marte And + Share
New Address & No GRAN 1, 1340 wn 50 URG, la	New Address.
Subscribed and sworn to before me this day of ULL 19	Subscribed and sworn to before me this day of HENDRICKS Circuit Court
lary per Kussel Clerk HENDRICKS Circuit Court	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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	Amatonia Services
County of HENDRICKS } **:	State of Indiana, HENDRICKS Ss:
Simul	Signed Father
Signed Father	Signed
Subscribed and seemed Mother	Subscribed and sworn to before me thisday of19
Subscribed and sworn to before me this day of	Subscribed and sworn to before the Clerk
Clerk	and position the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURS	T. A marriage license having been refused to the above named parties, the
Cas	ant by written order issued
authorizes and directs the issuance of	f a marriage needs to the
RETURN OF MARRIAGE LICENSE	se issued by the clerk of the HENDRICKS Circuit Court 19. Annumber of the HENDRICKS Circuit Court
of Indiana dated the DAVID G. WELLINGOOD TO ME TO STATE OF THE STATE O	se issued by the term of authorizing the joining together as husband and wife
DAVID G WILLIAM day of	LUGENE M. REEVES
Be it further remembered the following marriage certificate was filed in my of	fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of I,	BROWNSBURG County of HENDRICKS
and 81	UENDRICKS County State of
I, WILLIAM A PAPPANO one thousand nine hundred and 81 State of Indiana, Groom DAVID G. YEARWOOD and, Bride LUGENE M. REEVES were by me writed.	HENDRICKS County, State of IN HENDRICKS
were by me	the Clerk of the Circuit Court of
County. County.	hat purpose by the clerk of
	nut pur pose - s
Vated this 2nd day of MAY , 19.81	Signed /s/ WILLIAM A. PAPPANO
Dated this 2nd day of MAY , 1981	Signed /s/ WILLIAM A. PAPPANO Official Designation MAY 19 89
Dated this 2nd day of MAY, 19.81	Signed /s/ WILLIAM A. PAPPANO

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

152

HENDRICK	MARRIAGE LICENSE 4-16-81 Date of Application
Effective July 1, 1977	FEMALE Medical Examination Report Dated 4-7-8/
MALE Medical Examination Report Dated 4-7-81	Name of Physician Glenn Bater
Name of Physician	Name of Thysical
Name of Flystelan	ever procures the issuance of a license to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding	FEMALE APPLICANT Migrate Last
MALE APPLICANT Middle Middle	Name Kathleen D- Johnson
Name Kobest Ser Year	Date of Birth Month 14 1959
Date of Birth Month	Place of Birth (State or foreign country) Judolo Ind.
Place of Birth (State or foreign country) Intario Carada (State)	Residence Address 506 Maple Kare Bourg Nevel, Sate
Residence Address Street or R. R. Bburg Hend. Inc.	
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate. U Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Other (Specify) Birth Certificate - Dup-
Other (Specify) Passport. W picture	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes No Yes	1. Are you now or have you evel understand the second of t
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease?
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No Yes C
3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Byes C
5. Are you now under the influence of a narcotic drug?	Are you now under the influence of a narcotic drug? No B Yes C List the full names of any dependent children.
6. List the full names of any dependent children.	D. List the tun names of any september 1
	and an analysis of the shows
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above dependent children? No Tyes T
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support
8. Full name of father Schwart Koss Mark	8. Full name of father Lechard W. Youlak Revidence of father if deceased so state! Paragon, Incl.
Residence of father (if deceased so state)	nesidence of father in decease
Birthplace of father (State or foreign country) Waterfow Ontario Canada	Birthplace of father (State or foreign country) Buffalo, New York
9. Full maiden name of mother Palricia fello / Capita	9. Full maiden name of mother June Hargarite Kern
Residence of mother (if deceased so state) Onlary Canada	Residence of mother (if deceased so state) Brownsburg no.
Birthplace of mother (State or foreign country) Kitchener Ontario Canada	Birthplace of mother (State or foreign country) Buffalo. H. 9.
State of Indiana, County of HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS State of Indiana, HENDRICKS State of Indiana, I depose and state the information give in this application is true and correct
	a to the loom o John
New Address 526 MAPLE LANE BROWDSBURG	Signed Si
11	1/2 Though X
Subscribed and sworn to before me this & day of April 1981. Mary Sane Rivered & HENDRICKS	Subscribed and sworn to before me this day of day of the subscribed and sworn to before me this
Circuit Court	There are the selferk HENDRICKS Circuit Com
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS
Signed Father	
Signed Mother	V.A.
Subscribed and sworn to before me this day of, 19	Signed
	Subscribed and sworn to before me thisday of
	Cle
HENDRICKS CONTROL OF COURT	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County & Curcuit County in Clerks Office authorizes and directs the income of the county o	Court by written order issued uprul 14, 1987 and file
— W and directs the issuance	of a marriage license to the above named parties
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE
of Indiana dated the day of day of	ense issued by the clerk of the HENDRICKS Circuit Cou
Be it further remembered, the following	and office, to-wit:
I. Solve Control of the following marriage certificate was filed in my	office, to-wit:
one thousand nine hundred and 5	office, to-wit: hereby certify that on the day of April
State of Indiana Cusaus	
with Ditto	The state of the s
County to the the marriage as authorized by a marriage license issued to	County, State of
were by me united in marriage as authorized by a marriage license issued for Dated this day of , 19	r that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	2. /_
Filed and recorded in accordance with the	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation and Sup Ct The

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

MALE 41-14-81	Date of Application
Medical Examination Report Dated	FEMALE Medical Examination Report Dated 4-14-81
Name of Physician Walter 11/c II fannis	N 11/1/ (2 (2)
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever provided of Physician Calife II/c II/annis
shall be fined in any sum not exceeding tive nundred dollars (\$500,00)*. MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
First Middle Middle	FEMALE APPLICANT
Olex, Wall It seller	Name First Middle Y Last
Date of Birth	Date of Birth Menth Day Fancher
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 & P.
A D D D D D D D D D D D D D D D D D D D	At 8 By 392 D Child County State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of citizens	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes □
If answer is "yes", has the adjudication been removed? No□ Yes□ 2. Are you afflicted with a transmissible disease? No□ Yes□	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Ves	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes D
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No □ Yes □	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) Ambley, A.	8. Full name of father Calling Carriel
A. C.	Residence of father (if deceased so state) Auntsculle / / Min
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother / William A TeleMor	9. Full maiden name of mother wants of affiler
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Audiply - An
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, HENDRICKS as: Indepose and state the information given this application is true and correct.
CM WA	County of
Signed Signed	Signed Theresa tancher
New Address MX 8 DOX 292 Danap/s, Ind 46231	New Address RR8 BOX292 D Undplot
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19,
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS Circuit Court
	The same of the sa
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, State of Ind
County of HENDRICKS ss:	County of HENDRICKS
Signed Father	Signed Father
Signed Mother	SignedMother
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this
	Clerk
Clerk	the share named parties the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS	art by written order issued
authorizes and directs the issuance of	a marriage necesse to the
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE 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 day of Doub	10 males
	ad Stranger
Row homen and a Manual h	ereby certify that on the day of County of County of
nine hundred and	cereby certify that on the County of County of County of County, State of
Indiana, Groom	County State of
and, Bride of of	Hendricks Hendricks
Dere by me united in marriage as authorized by a marriage license issued for t	hat purpose by the Clerk of the Circuit Court of
Intel in	A work of the things when the
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation 1981.
ued and recorded in accordance with the laws of the State of Indiana this	Signed Clerk HENDRICKS Circuit Court
	HINDRICK Circuit Court

Re-Marriage

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

.Circuit Court

MALE Medical Examination Report Dated Name of Physician MALE APPLICANT MALE APPLICANT MALE APPLICANT Month Mo	FEMALE Medical Examination Report Dated Name of Physician Martin Jeoney
Name of Physician	Medical Examination Report Dated Name of Physician FEMALE APPLICANT Name Date of Birth Month Day Place of Birth (State or forging country) Medical Status: Previous Marital Status: Never Married Date of birth verified by: Date of birth verified by: I Are you now or have you ever been adjudged to be of unsound mind? Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug? List the fulnames of any dependent children. Married Tanswer is "yes", it is required that this Application be accompanied by satisfactory proof that yo compliance with any court order or orders is support Tanswer is "yes", it is required that this Application be accompanied by satisfactory proof that yo compliance with any court order or orders is support Tanswer is "yes", it is required that this Application be accompanied by satisfactory proof that yo compliance with any court order or orders is sued for their support Tanswer is "yes", it is required that this Application be accompanied by satisfactory proof that yo compliance with any court orders or orders is sued for their support Full name of father.
Name of Physician	Name of Physician
Name of Physician	FEMALE APPLICANT Name Date of Birth Month Day Place of Birth (State or forging country) Residence Address Street or R. R. Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. The summer is "yes", it is required that this Application be accompanied by satisfactory proof that you compliance with any court order or orders is sued for their support. 8. Full name of father. Name Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Annulment Divorce Annul
MALE APPLICANT Mark Mark Middle Both Last	Name Date of Birth Month Day Year 1949
MALE APPLICANT Mark Mark Middle Both Last	Name Date of Birth Month Day Year 1949
ace of Birth Month Day Year According to Birth Month Day Year	Date of Birth Month Day Year 1949 Place of Birth (State or forign country) Residence Address Street or R. R. City Marian Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No If answer is "yes", has the adjudication been removed? 3. Are you related to the male applicant closer than second cousin? No If any out on the influence of intoxicating liquor? No If Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 7. Are you required by any court order or orders to support the above dependent children? 8. Full name of father. 1. August 1. State 1. State 1. State 1. State 2. State 2. State 3. St
Are you required by any court order or orders to support the above dependent children? Are you required by any court order or orders to support the above dependent children? Are you required by any court order or orders issued for their support.	Place of Birth (State or forgen country) Residence Address Street or R. R. Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? 3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? 6. List the fulfinames of any dependent children. The you required by any court order or orders to support the above dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that yo compliance with any court order or orders issued for their support. 8. Full name of father. Residence Address Street or R. R. City County Status Mules Annulment City Annulment City Annulment City No Death County Status Mules Status Mule
ace of Birth Month	Residence Address Street or R. R. City Street or R. R. Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Other (Specify) White Additional Decree If answer is "yes", has the adjudication been removed? No No Are you afflicted with a transmissible disease? No Are you related to the male applicant closer than second cousin? No Are you now under the influence of intoxicating liquor? No Are you now under the influence of a narcotic drug? No Example No The Are you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children? No The you required by any court order or orders to support the above dependent children. No The young the
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Other (Specify)	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? 3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 7. Are you required by any court order or orders to support the above dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that yo compliance with any court order or orders issued for their support. 8. Full name of father No Description: No
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	8. Full name of father Marles &. Aubry
Full name of father Wholl F. Booth	
	Residence of father (if deceased so state) Such Such
Residence of father (if deceased so state) Nell BUREL	
Birthplace of father (State or foreign country) and many the State or foreign country)	Birthplace of father (State or foreign country) Chateswelle Ind.
Full maiden name of mother Lova 1. Fourty	9. Full maiden name of mother. Coluth & Lee
Residence of mother (if deceased so state) Inelable Lace	Residence of mother (if deceased so state) Include Include
Birthplace of mother (State or foreign country) She by well In	2.0.0
te of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana
in this application is true and correct.	County of HENDRICKS as: I depose and state the information in this application is true and control of the state of the sta
Signed Jarry Mooth	Signed X Clarlen 2. Book
New Address RT. 1 BOX352 DANVILLE, IN.	New Address RT. 1 BOX 352 DANVILLE, IN.
scribed and sworn to before me this all day of April 181	Subscribed and sworn to before me this RD day of Grid,
Mary and Ressell Clerk HENDRICKS Circuit Court	Mary and Russelberk HENDRICKS Circuit
	The forest Circuit
NSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
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
is, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	the other parent unnecessary.
e of Indiana,	
nty of HENDRICKS ss:	State of Indiana,
SignedFather	County of HENDRICKS } ss:
Signed	Signed
scribed and sworn to before me this day of 19	Signed
	Subscribed and sworn to before me thisday of, I
Clerk	
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Court	Γ Α
County Superior	Intrinage license having been refused to the above named parties
authorizes and directs the issuance of	art by written order issued 3-day wawer and
RETURN OF MARRIAGE LICENSE	AND MADE above named parties.
the Di Kemembered, there was fled in	AND MARRIAGE CERTIFICATION
day of Upri	the clerk of the HENDRICKS Circuit (
it further remembered, the following marriage certificate was filed in my offi	ad authorizing the joining together as husband and
thousand nine hundred and he at the of Indiana, Groom at Bride Rocat Market Street Rocat Market Market Street Market	ereby certify that on the 33 day of Carlo
e of Indiana, Groom at	County of County of County of County
e by me united in marriage as authorized by a marriage license issued for the	County State of
e by me united in marriage as authorized by a marriage license issued for the ed this. day of	County State of
ed this 23 day of 19 19 19 19 19 19 19 19 19 19 19 19 19	hat purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	No.
d and recorded in accordance with the laws of the State of Indiana.	Signed Signal Designation of the August Signature of the State of the

Form Prescribed By
Health under Authority
of 1C of July 1 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

MALE Medical Examination Report Dated 4-5-81	FEMALE Date of Application
Medical Examination	Medical Examination Report Dated 1-9-81
Name of Physician Wesne Boker	
ALL QUESTIONS MUST BE ANSWERED IC 31-1-3-6 prescribed "False statement, Wil-	Name of Physician Wlene Roker
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fired in any same not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, represented
Name First Middle Last	Name First
Date of Birth Mansh Day Year	
Place of Birth (State on foreign country)	Date of Birth Month Day Year
Place of Birth (State Place)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	and the
P.O. Box 224 Pthoto Dud.	Residence Address Street or R. R. City County State
Previous Marital Status Never Married Q OR	
Last Marriage Ended By Death O Divorce O Annulment O	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of high worlding by Date of high worlding b
& Other (Specify) Drivais & No of piet	Date of birth verified by: Birth Certificate Judicial Decree
	& Other (Specify) Drivers &is upid.
1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes D	I. Are you now or have your
If answer is "yes" has the adjudication been removed? No D Yes D	If anymon is bound by an any second s
2. Are you afflicted with a transmissible disease? No A. Yes D.	2 American Miles I and
3. Are you related to the female applicant closer than second cousin? No Yes O	3 Are you selected and
4. Are you now under the influence of intoxicating liquor? No T Yes D	4. Are you now under the influence of intoxicating liquor? No A Yes
5. Are you now under the influence of a narcotic drug? No Ves D	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7 Are you required by any court order or orders to support the above dependent children? No D Van D	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is 'yes', it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
if answer is yes, it is required that this Application of accompanied by satisfactory proof that you are in compliance with any squirt order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father.	compliance with any court order or orders issued for their support.
0.0	8. Full name of father Robert W. Poster
Residence of father cit decreased so status Titaline Und.	Residence of father if deceased so state) North Salen Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
treelill soll last	or o mex.
9. Full masden name of mother \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9. Full maiden name of mother Callana J. M. Massy
Residence of mother (if thereased so state)	Residence of mother (if deceased so state)
Birthplace of mother i State or foreign country t	Birthplace of mother (State or foreign country)
State of Indiana.	
County of HENDRICKS ** in this application is true and correct.	State of Indiana. HENDRICKS Bas: I depose and state the information given in this application is true and correct.
V Com Will 21, +	Signed V Phisting L. Poeter
Signed Danny Reath Hurt	
New Address 40 Smath to Puttson Vila	New Address 40 Sm. th St. V. Hisboro, In
Subscribed and sworn to before me this 30 day of agril 1981.	Subscribed and sworn to before me this 30 day of April 1981.
Man Car Provide at HENDRICKS	May lang Rusul Clerk HENDRICKS Circuit Court
Clerk Introducto Circuit Court	They have the
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS ss:
County of HENDRICKS 88:	County of
Surged	Signed
	Signed
Signed Mother	Subscribed and sworn to before me this
Subscribed and sworn to before me this day of	
Clerk	Clerk
The state of the s	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 dose having and filed
HENDRICKS Co	aret hy written order issued
authorizes and directs the issuance of	i a marriage necessity
	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
of Indian let Bi Kemembered, there was filed in my office a marriage them	, 190 , authorizing the joining together as husband and wife
of Indiana dated the 27 day of Upril	se issued by the clerk of the
District Control of the Control of t	nu
The remembered, the following marriage certificate was fied in ing	day of
one thousand	at County, State of County
State of I	County, State of
State of Indiana	Country State of Williams,
were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS He Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for	that purpose by the constitution of the consti
Dated 41:	deal water 9
Dated this day of Mary, 1981	Official Designation Winited 1981.
	- 1/10:
Filed and recorded in accordance with the laws of the State of Indiana this	day of Clerk
	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

4.20.81

Form Prescribed By	ADDITION FOR	MARRIAGE LICENSE	
Indiana State Board of Health under Authority of J.C. 31-1-3-2	APPLICATION TO SE		Application
Effective July 1, 1977			
		FEMALE Medical Examination Report Dated 4-16-8	
MALE Medical Examination Report Dated	4-16.81	Name of Physician Muchael &. 7	Jely.
Name of Physician Wishard	J. Nuly	Name of Physician	The second secon
= an example IC 31.	1-3-6 prescribed "False statement - Will	noever procures the issuance of a license to marry by any false statement, respectively. FEMALE APPLICANT	presentation or preten
shall be fined in any sum not exceeding		FEMALE APPLICANT	
MALE APPLICAN	Last	Name First Middle	Last
Name First Middle	mine	Date of Birth Month	10.73
Date of Birth Month Day	1939	Place of Birth (State or foreign country)	175
Place of Birth (State or foreign country)		Peterstung, Indiana	County
Residence Address Street or R. R. Cit.	y County State	Residence Address BR 2 BX 3/7A, Clayton	Hen Dr
RRA BX 317 A Clas	for on.	Previous Marital Status: Never Married OR	
Previous Marital Status: Never Married OR		Last Marriage Ended By: Death Divorce Annulment	
Last Marriage Ended By: Death Divorce Annulment	00700	Date of birth verified by: Birth Certificate Judicial Decree	
Date of birth verified by: Birth Certificate Judicial De		Quince lience	Putun
Other (Specify)	w pretere	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	No. Xvo
1. Are you now or have you ever been adjudged to be of unsound	d mind? Yes \(\text{No} \text{ Yes} \(\text{Yes} \)	Are you now or have you ever been adjudged. If answer is "yes", has the adjudication been removed?	No□ Yes
If answer is "yes", has the adjudication been removed?	No Yes	Are you afflicted with a transmissible disease?	No Yes
2. Are you afflicted with a transmissible disease?		Are you related to the male applicant closer than second cousin?	Ng X Yes
3. Are you related to the female applicant closer than second co 4. Are you now under the influence of intoxicating liquor?	usin? No Yes □	4. Are you now under the influence of intoxicating liquor?	No Yes
5. Are you now under the influence of a narcotic drug?	No X Yes □	5. Are you now under the influence of a narcotic drug?	No Yes
6. List the full names of any dependent children.	·	6. List the full names of any dependent children.	
Relecca Marie Mi	ne		
	4		
	0:		
7. Are you required by any court order or orders to support the	a have	7. Are you required by any court order or orders to support the above	
dependent children?	No □ Yes	dependent children?	No □ Yes
If answer is "yes", it is required that this Application be accom-	ipanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satis	sfactory proof that you are
compliance with any court order or orders issued for their su	Min 8	compliance with any court order or orders issue for their support. 8. Full name of father	
6. Full halled father	211	d. 20)
Residence of father (if deceased so state)		Residence of father (if deceased so state)	
Birthplace of father (State or foreign country)	wiky	Birthplace of father (State or foreign country)	
9. Full maiden name of mother 4 You	in plans	9. Full maiden name of mother. Recent potential	
Residence of mother (if deceased so state)	Ky	Residence of mother (if deceased so state)	Dod.
Birthplace of mother (State or foreign country)	neky	Birthplace of mother (State or foreign country)	na
HENDRICKS 788: :- 4	pose and state the information given this application is true and correct.		te the information giv
County of TIETANICKO	\$ 000	County of	on is true and corre
Signed	2 800	Signed Malle M. She	nefeesel
New Address LL Bex 3.		New Address RR2 Box 317+	7 Clayter
Subscribed and sworn to before me this de	ay of Opial, 1981	Subscribed and sworn to before me min 20 day of 1	7 pine 19 5
Il buy Jone Kussellier	HENDRICKS Circuit Court	To any Jane Busself HENDE	RICKS Circuit Cou
			in the second second
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent f		We, the parents, of this applicant hereby give consent for this marr	iage. If only one pare
signs, state facts which render the consent of the other	parent unnecessary	signs, state facts which render the consent of the other parent unne	
State of Indiana,			***************************************
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	
Signed	Father	County of TENDRICKS	
		Signed	Fath
Subscribed and sworn to before me this	Mother	Signed	Moth
		Subscribed and sworn to before me thisday of	
	Clerk		Cle
COMPLETE IF MARRIAGE LICENSE IS	SUED BY ORDER OF COM	RT. A marriage license having been refused to the above	
HENDRICKS County	01 000	RI. A marriage license having been refused to the above	named parties, th
inaut	horizes and directs the issuance	Court by written order issued	and file
Dia	NIDY OF	a marriage license to the above named parties.	
Be It Remembered, there was	filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS	
of Indiana dated the d	lay of Ophil	HENDRICKS	Circuit Cou
Be it further remembered, the following marr 1, LU BAWARA Cart	mage contif	and Moles authorizing the joining together as	s husband and wi
1. RW. Durbara 5 Past	- stificate was filed in my	office, to-wit.	
one thousand mine hundred		hereby contitue	1
State of Indiana, Groom James &	Mine	at Illegion Country of Al	endricks
and, Bride !! /Will yn Shin	fessel	at Claricks at County of House County, State of House County, State of	ndiara
were by me united in marriage as authorized	by a marriage license is	of Hadricks County of Hadricks County, State of that purpose by the Clerk of the Circumstance of the County, State of the Circumstance of the Circ	Indiana.
Dated this 25	Or O	r that purpose by the Clerk of the Circuit Court of	IENDRICKS
auy of My	oril , 19 8	1	,
		Simulation of the state of the	erter
rued and recorded in accordance with the law	s of the State of Indiana 11.	Official Designation day of May Signed Mary Jame Reports	*************************
	this	day of Mary	, 19.8/
		signed Illary Jane Russell	The same and a same
		HENDRICK	S Circuit Cou

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR	F INDIANA MARRIAGE LICENSE No. 157
of I.C. 31-1-3-2 Effective July 1, 1977 HENDRIC	KS File
	County
MALE Medical Examination Report Dated 4-16-81	FEMALE Date of Application
Name of Physician Laured Naggard	Medical Examination Report Dated 4-16-81
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement - We-	Name of Physician Lawed Haggard
shall be fined in any sum not exceeding five hundred dollars (\$500,00)",	Name of Physician Naved Haggard Dever procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle Last	FEMALE APPLICANT
Date of Birth Month Day Year	Karth Migale De Jan
Place of Birth (State pr. foreign country)	Date of Birth Month Day Year
Residence Address Street or R. R. County County State	Place of Birth (State or theign country)
122 Williams Dr. apt Bourg Hend Ind	Residence Address Street or R.R. City / County / State
Previous Marital Status: Never Married D OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by	Date of birth verified by: Birth Certificate U Judicial Decree
Other(Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No Ves 2. Are you afflicted with a transmissible disease? No Ves Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No W Yes	2. Are you afflicted with a transmissible disease? No Yes \(\sigma\)
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. As you sowied by any court order or orders to support the above	
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father Orthur Jarnousetth	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) Brownsburg Ind	8. Full name of father Herpert R Schmidt
Birthplace of father (State or foreign country) Pennoldiania	Residence of father (if deceased so state) India.
Garain Smith	Birthplace of father (State or foreign country)
9. Full maiden name of mother Storigia Smith	9. Full maiden name of mother Cana a Raws
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Sholps Und.
Birthplace of mother (State or foreign country) State of Indiana,	Birthplace of mother (State or foreign country) Ulymont
County of HENDRICKS ss: I depose and state the information given this application is true and correct.	State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.
Signed & Nanny Forusworth	- x Knethum & Schmidt
New Address /2 2 Williams Apt I	signed (acount of the T
Subscribed and sworp to before me this 20 day of April 181.	Subscribed and sworn to before me this 20 day of 4011 18
Mari Land Pillon HENDRICKS	Mary Charles HENDRICKS
Circuit Court	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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana.
County of HENDRICKS ss:	County of HENDRICKS
Signed. Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day of , 19	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'	T. A marriage license having been relused to the above and filed urt by written order issued
inauthorizes and directs the issuance of	f a marriage license to the above named parties.
The state of the s	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licens	SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court se issued by the clerk of the
of Indiana dated the day of Indiana dated the	, 19, authorizing the joining together as husbana and wife
D	nd 1 2 miles
I,	day of County of Marien,
The state of the s	County of M. D. Marie
State of Indiana, Groom Survey & Farmers of	(Hendricke) County, State of Andrews
and, Bride Sather Salmed of	Howking County, State of HENDRICKS
a we united in	hat purpose by the con-
Dated this 24 day of 2011, 1981	. Plies Stone
day of 19	Signed Philip Stone Official Designation (1981)
Filed on A	Official Designation , 1981.

R. ASSOC HENDRICKS

Signed Massey

Clerk

Circuit Court

Name of Physician Dowied Naggard	Medical Examination Report Dated 4-16-81
Name of Physician	
ALL QUESTIONS 31C 51 BL. and a statement who shall be fined in any sum not exceeding five hundred dollars (\$500,000°.	Name of Physician Naviel Haggard oever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT First Middle	
Name Danny a. Farmous to	Name FEMALE APPLICANT Migale
Date of Birth Month Day Year 195 8	Date of Birth Month Schmidt
Place of Birth (State pr. foreign country) Pennsylvania	Place of Birth (State or threign country)
Residence Address Street or R. R. Cury County State	Residence Address (Street or R. P.
122 Williams Nr. Upc Boury Hend Ind	122 Williams Dr. Out 1 Byung County State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No ves 2. Are you afflicted with a transmissible disease? No ves Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Ves C	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes O	4. Are you now under the influence of intoxicating liquor? Now Yes 5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	THE RESERVE THE PROPERTY OF THE PARTY OF THE
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father withur January of their support.	compliance with any court order or orders issued for their support.
Branne bus O. A	8. Full name of father Herpert B. Schmidt
10	Residence of father (if deceased so state) Included.
Birthplace of father (State or foreign country) Penylogicania	Birthplace of father (State or foreign country) Germany
9. Full maiden name of mother Glorgia Smith	9. Full maiden name of mother Edna a. Daves
Residence of mother (if deceased so state) Brounds burg, and	Residence of mother (if deceased so state) Snelph Incl.
Birthplace of mother (State or foreign country) Jennoylusus	Birthplace of mother (State or foreign country) Lermont
State of Indiana. County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Chair of Taillian
County of this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed X Nanny formswort	Signed X Cathun Schmidt
New Address /2 2 Williams Apt I	New Address 122 Williams (gpt I
Subscribed and sworp to before me this 20 day of April 181.	Subscribed and sworn to before me this 20 day of April 12
Mary Jane Russell and HENDRICKS	Mary and Russell Glerk HENDRICKS Circuit Court
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Live	
State of Indiana, County of HENDRICKS } ss:	State of Indiana, HENDRICKS ss:
	County of
Signed. Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day of	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	The above named parties, the
HENDRICKS LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been returned and filed urt by written order issued
in	f a marriage license to the above named parties.
authorizes and directs the issuance of	MARRIAGE CERTIFICATE
Be It Remembered the Challenge Free a marriage license	se issued by the clerk of the HENDRICKS Circuit Court 19 8/ authorizing the joining together as husband and wife
of Indiana dated the day of Light day of	, 19. 21, authorizing the joining together as husband and wife
Rolling to the state of the sta	nd land
the remembered, the following marriage certificate was filed in my of	fice, to-wit:
	County of
one thousand nine hundred and State of Indiana, Groom and, Bride	County, State of Indiana,
and, Bride Catherine Saludt of	County, State of Andreway, County, State of HENDRICKS HENDRICKS

Form Prescribed By Indiana State Board of

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

42 4-21-81

158

.. Circuit Court

fealth under Authority f I.C. 31-1-3-2 HENDRICKS	County Date of Application
Offective July 1, 1977	FEMALE Medical Examination Report Dated
MALE Medical Examination Report Dated	Name of Physician Demothy Breist
Name of Physician Demothey Whent False statement - Whoe	the issuance of a license to marry by any false statement, representation or preter
1 2 of 1 2 6 prescribed Talas	ver procures the same
hall be lined ill ally sum ill	Middle
MALE APPLICANT Middle Last	Name Seis Day Year
ame First.	Date of Birth Month
ate of Birth Month Day	Place of Birth (State or foreign country)
lace of Birth (State or foreign country)	Residence Address Street or R. R. City County State
esidence Address Street or R. R. City County State	436 Charles Br. Diagrand
4.20 (Masses	Previous Marital Status: Never Married OR
ast Marriage Ended By: Death Divorce Annulment Annulment	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificat
age of birth verified by	A Other (Specify) Quiseo Spec uppert
1 Other (Specify) Daniela Lie W pint	1. Are you now or have you ever been adjudged to be of unsound mind? No P Ye
Are you now or have you ever been adjudged to be of unsound mind?	If answer is "yes", has the adjudication been removed? No□ Yes
If answer is "yes", has the adjudication been removed? No Yes Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmission
No W Yes I	3. Are you related to the male applicant closer than second cousin? No ♥ Ye 4. Are you now under the influence of intoxicating liquor? No ♥ Ye
No influence of intoxicating liquor?	4. Are you now under the influence of a narcotic drug? No ♣ Yo
5. Are you now under the influence of a narcotic drug?	6. List the full names of any dependent children.
5. List the full names of any dependent children.	Sweets Buto
	Sugette Buston
	James warms
	the share to support the share
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No P
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you a
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Hanney & Hory	8. Full name of father Chipse & 1 2000
Residence of father (if deceased so state)	Residence of father (if deceased so state) A round along Mid.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother guella E. Schoole	9. Full maiden name of mother Marine V. River
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
	Birthplace of mother (State or foreign country)
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	State of Indiana, I depose and state the information
County of HENDRICKS 88: in this application is true and correct.	County of HENDRICKS 88: in this application is true and con
Signed X. Michael W. Jran	Signed X Shula K Butor
New Address 436 Charles Dr. Brownstrung for 461	New Address 43/6 Charles Druce Brownshu
Subscribed and sworn to before me this 2 day of 2011 1981	Subscribed and sworn to before me this 21 day of April 19
Many Jone Russell Clerk HENDRICKS Circuit Court	May Jane Russell Gerk HENDRICKS Circuit
Circuit Court	Hard Hard Clerk
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one p
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 of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed Father	Signed
Signed	Signed
Subscribed and sworn to before me this day of	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU HENDRICKS County	RT. A marriage license having been refused to the above named parties
in authorizes and directs the issuers	Court by written order issued and an an
PETUDN OF MADDICE	of a marriage license to the above named parties.
of Indiana dated the day of day of	SE AND MARRIAGE CERTIFICATE
of Indiana dated the and a day of	ense issued by the clerk of the HENDRICKS Circuit
Be it further remembered, the following marriage certificate was filed in my	and Sola authorizing the joining together as husband and
I Rose to the following marriage certificate was filed in my	office, to-wit:
	hereby certify that and the
one thousand nine hundred and State of Indiana, Groom	at Indplo
and, Bride Steele Buston	of their country of Jud
were by me united in marriage as authorized by a marriage in	County, State of County
were by me united in marriage as authorized by a marriage license issued fo County. Dated thisday of	r that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of 19.	S \
	Signed & S Common Signed
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Market

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

STATE OF INDIANA APPLICATION D

Russell HENDRICKS

..Clerk

.Circuit Court

Health under Authority of LC, 31-1-3-2 Effective July 1, 1977 HENDRICK	MARRIAGE LICENSE File 42
MALE Medical Examination Report Dated 4-13-81	County V-21-81 Date of Application
Name of Physician Comes Black	Medical Examination Report Dated 4-13-81
Name of Thysician	Nows and
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or protocol
First Middle	FEMALE APPLICANT
Name John D. Switzer	Name First Middle Last
Date of Birth	Date of Birth Month Day Year
Place of Birth (State or foreign country) Street or R. R. City 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 OR	- La cacherest MAP Brown Sura Ond.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Down Lie W peat	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	1 Are you power by
If answer is "yes" has the adjudication been removed? No Yes Yes	If answer is "yes", has the adjudication been removed? No Yes No Yes
2. Are you afflicted with a transmissible disease? No S Yes 3. Are you related to the female applicant closer than second cousin? No Y Yes	2. Are you afflicted with a transmissible disease? No A Yes
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? No 🖺 Yes
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug? No Ves
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Alago Magne Switzer	
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support,	compliance with any court order or orders issued for their support.
8. Full name of father The Market	8. Full name of father house R. Sonmanullo
Residence of father (if deceased so state) Deschura, Ord	Residence of father (if deceased so state) Source Stuge Sad.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother form Wellan	9. Full maiden name of mother Jeyer K. Brotheston
Residence of mother (if deceased so state) Contact Residence	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, HENDRICKS Section 1 Section 2 HENDRICKS HENDRICKS Section 2 HENDRICKS
1 // (* -	1/11/11/11
Signed X S WELZER	Signed Afficially S. March New Address 56 Oakhanst M. N. P.
New Address So CHIK HUNST FLATER ANDWARD BURG JA	
Subscribed and sworn to before me this day of HENDRICKS	Subscribed and sworn to before me this
Clerk Circuit Court	Clerk 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, UENICOLOGIC SSS:
County of HENDRICKS 58:	County of
Signed Father	Signed Father
Signed Mother	Signed
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	The marriage license having been refused to the above named parties, the
TENDRICKS CO.	ant by written order issued
inauthorizes and directs the issuance of	f a marriage license to the above named parties.
TOTAL CONTRACT OF THE PARTY OF	AND MARRIAGE CERTIFICATE HENDRICKS Cinneit Court
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
1, John Morris 04	hereby pertify that on the any of the Standricks
thousand nine hundred and stolling - The	at State of Million
State of Indiana Grown Control 1) Suriture	of State of Malana,
and, Bride Kimberly L. Moore of	of Hendricks County, State of Moliana, HENDRICKS The transpose by the Clerk of the Circuit Court of HENDRICKS
County me united in marriage as authorized by a marriage license issued for t	nat purpose vy
Dated this 15t day of May , 19 81	Signed John C. Mowrer Court I
day of 11 flly	Gudge, Superior onua is

APPLICATION FOR MARRIAGE LICENSE

160 42 H-23-81
Date of Application

..... Circuit Court

Form Prescribed By Indiana State Board of APPLICATI	ON FOR M.	ARRIAGE LICENSE	File 42
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of Application
		FEMALE Medical Examination Report Date	18-J-L b
MALE Medical Examination Report Dated		Name of Physician	too enolle.
0 5 000			
ANGWEDED 1 (* 31-1-3-6 prescribed "Fals	e statement – Whoeve	r procures the issuance of a figure	DDI ICANIT
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT		FEMALE A	Middle Middle
Name First, Middle	. Last	Moura B	Day Park
Date of Birth Month Day Year		Date of Birth Month Place of Birth (State or foreign country)	2 2 28 28
Place of Birth (State or toreign country)		Didge.	City County State
Residence Address Street or R. R. City County	State	Residence Address Street or K. R. 531 Broken Bour In	ail, at 1404 Didas
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OR	
Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce A	nnulment Ludicial Decree
Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	
Other (Specify) Surely Lin.		The Other (Specify) Sures	
1. Are you now or have you ever been adjudged to be of unsound mind?	N	 Are you now or have you ever been adjudged to be If answer is "yes", has the adjudication been remove 	1
If answer is "yes", has the adjudication been removed?	No ☐ Yes ☐	2. Are you afflicted with a transmissible disease?	No□ Yes No□ Yes
Are you afflicted with a transmissible disease? Are you related to the female applicant closer than second cousin?		3. Are you related to the male applicant closer than s	
4. Are you now under the influence of intoxicating liquor?	No A Yes	4. Are you now under the influence of intoxicating lie	
5. Are you now under the influence of a narcotic drug?	No ♥ Yes □	5. Are you now under the influence of a narcotic drug6. List the full names of any dependent children.	Ro 9 Yes
6. List the full names of any dependent children.		b. List the full maines of any dependent constraints	
			THE STATE OF THE S
1			
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or orders to si	upport the above
dependent children?	No Yes	dependent children?	No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory proceedings of their support.	of that you are in	If answer is "yes", it is required that this Application compliance with any court order or orders issued for	
8. Full name of father Lang & Sames		8. Full name of father Dank &	or they support.
Residence of father (if deceased so state)		Residence of father (if deceased so state)	. bel. elab.
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Ind.
9. Full maiden name of mother Policies . Poskin		9. Full maiden name of mother Balty	Solder . I
Residence of mother (if deceased so state) St. Petersburg Bea	which has	Residence of mother (if deceased so state)	bal slak
Birthplace of mother (State or foreign country) Sudala. W. D.		Birthplace of mother (State or foreign country)	a find
State of Indiana, County of HENDRICKS Sas: I depose and state the info in this application is true	and correct	State of Indiana,	I depose and state the information give
Signed X Janua 200 Souly		County of TILINDRICKS	in this application is true and correct
New Address 3 Froken Bon Avail they I	111	Signed X	ea fan Farish
Subscribed and sworn to before me this 23 day of 2011	_		Beobus Dow Trail #140
Many Jane Rusel Clerk HENDRICKS	, 1921.	Subscribed and sworn to before me this	
Clerk	.Circuit Court	Many Jane Krosel	Clerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GUAR	RDIAN
We, the parents, of this applicant hereby give consent for this marriage. If on	ly one parent	We, the parents, of this applicant hereby give of	
signs, state facts which render the consent of the other parent unnecessary		signs, state facts which render the consent of t	
S. A. A. I. I.			
State of Indiana, County of HENDRICKS ss:		State of Indiana,	
Signed		County of HENDRICKS S8:	
Signed	Father	Signed	Father
Subscribed and sworn to before me thisday of	Mother	Signed	Mother
uay of	, 19 S	Subscribed and sworn to before me this	day of, 19
COMPLETE IE WARRY	Clerk		Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County	R OF COURT. A	A marriage license having been a	and parties the
HENDRICKS County authorizes and directs	Court	by written order issued	and filed
DEM		to the above named na	arties.
the membered there was flad:	LICENSE A	ND MARRIAGE CEDESTRA	
day of	0	osaea by the clerk of the	NDRICKS Circuit Court
Be it further remembered the All		19. authorizing the join	ining together as husband and wife
arotte 3 attended	med in my office	, to-wit:	ONEL
I, state of Indiana, Groom Sta	here	by certify that on the 35 d	ay of april,
and, Bride Many	of	Hand	, County of
were by me united in marriage as authorized to	of	Coun	ity, State of Jed
State of Indiana, Groom und, Bride were by me united in marriage as authorized by a marriage licens Dated this day of	e issued for that	purpose by the Clerk of the Civilian	ity, State of HENDRICKS
Dated this day of day of	, 1981	of the Circuit Con	irt of
		Signed Juneth	wester 3
Filed and recorded in accordance with the laws of the State of Inc	Offic	rial Designation	
		day of	81

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

MALE Medical Examination Report Dated 4-2-81	FEMALE Date of Application
	Medical Examination Report Dated 4-2-81
Name of Thysical	Name of Division of A
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ver procures the issuance of a license to marry by any false statement, representation
MALE AFFLICANT	
Name William Middle Last	Name First Middle Last
Date of Birth Day Year	Date of Birth Worth Wash (Role
Place of Birth (State or foreign fountry)	Place of Birth (State or foreign country) Day 1938
Residence Address Street or R. R. City County State	Vennomo e
to fare knownstring, Nenducky Sund.	3454 M. Street or R. R. City County State
Previous Marital Status: Never Married OR O Last Marriage Ended By: Death ODivorce Of Annulment O	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Are you now or have you ever been adjudged to be of unsound mind? No Yes Yes Other (Specify)	A Other (Specify) Pruse's license w/ picture
If answer is "yes" has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Ves O	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes
3. Are you related to the female applicant closer than second cousin? No Yes	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No Yes No Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. Yes
	Kathleen and 15
	Sent Onele 13
	man upper
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No□ Yes□ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father William F. Cottongin	8. Full name of father James Childress
Residence of father (if deceased so state). Alclastol	Residence of father (if deceased so state) Molplo, Judionic
Birthplace of father (State or foreign country) Kentucky	Birthplace of father (State or foreign country) Locgie,
9. Full maiden name of mother Eliza J. Woodall	9. Full maiden name of mother Emma young forton
Residence of mother (if deceased so state) molple, Ind.	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Kentucky	Birthplace of mother (State or foreign country) Limitsel
State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
County of	County of the thirty of the county of
Signed William H. Cottongin	Signed & ayrely May Copye
New Address # 2 Foffice Diownsby hd.	New Address T Toffe and Brawnsung int.
Subscribed and sworn to before me this 23 day of Upul 1987	Subscribed and sworn to before me this day of HENDRICKS Circuit Court
Thay Jane Kussell Gerk HENDRICKS Circuit Court	Thuy faul fallstell Clerk TENDRICKS 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 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
signs, state facts which render the consent of the other parent unnecessary.	
	State of Indiana,
State of Indiana. County of HENDRICKS 88:	State of Indiana. HENDRICKS County of
Father	Signed Father
Signed Mother	Signed Mother
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of, 19
Clerk	
	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 purt by written order issued
in County directs the issuance	of a marriage license to the above named parties.
DETUDN OF MARKIAGE DICERTO	
Be It Remembered there was filed in my office a marriage licer	E AND MARRIAGE CERTIFICATION HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the 23 graday of Capillana	se issued by the clerk of the
of Indiana dated the 23 day of william H. Cottonsin	HENDRICKS Circuit Court is issued by the clerk of the authorizing the joining together as husband and wife and Ottothy May Office to-wit:
of Indiana dated the 23 day of william H. Cottonsin	HENDRICKS Circuit Court fine issued by the clerk of the clerk of the poining together as husband and wife find Dototly May apple fiftee, to-wit: Abot on the 30th day of April 1986.
of Indiana dated the 23 Jay of Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and Lighty - The	HENDRICKS Circuit Court nse issued by the clerk of the 1981, authorizing the joining together as husband and wife and Markey May apple ind office, to-wit: hereby certify that on the nat Indianapolis County, State of Markey County, State of
of Indiana dated the 23 Jay of Collins of Indiana Groom William H. Cotton Open	HENDRICKS Circuit Court nse issued by the clerk of the 19.8. authorizing the joining together as husband and wife and DIDIKY May apple office, to-wit: hereby certify that on the Anguarapolis County, State of
of Indiana dated the 23 Jay of Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and White The State of Indiana, Groom William H. Cottonage.	HENDRICKS Circuit Court nse issued by the clerk of the 19.8. authorizing the joining together as husband and wife and Motothy May apple office, to-wit: hereby certify that on the 30th day of April hereby certify that on the County, State of Marana of Hendricks County, State of Marana County, State of Marana County, State of Marana County, State of Marana
of Indiana dated the 23 day of Colored was filed in my office a marriage too. Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and lighty— The State of Indiana, Groom William H. Cottonger and, Bride And they may apply the were by me united in marriage and the a marriage license issued for	HENDRICKS Circuit Court nse issued by the clerk of the 19.8. authorizing the joining together as husband and wife and DIDING May apple office, to-wit: hereby certify that on the 30th day of April hereby certify that on the County of Maryon, at Include Apple County, State of Marana County, State of Marana, County, State of Marana,
of Indiana dated the 23 day of Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and lighty— The State of Indiana, Groom William H. Withouth of were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS Circuit Court nse issued by the clerk of the 19.8. authorizing the joining together as husband and wife and Motothy May apple office, to-wit: hereby certify that on the 30th day of April hereby certify that on the County, State of Marana of Hendricks County, State of Marana County, State of Marana County, State of Marana County, State of Marana
of Indiana dated the 23 Jay of Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and Lighty-The State of Indiana, Groom William H. Cottonique and, Bride Doubley May apple of were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS Circuit Court ase issued by the clerk of the 19.8. authorizing the joining together as husband and wife and DIDING May apple office, to-wit: hereby certify that on the 30th day of April hereby certify that on the County of Margon County, State of Marana County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of Signed John HENDRICKS Official Designation Official Designation Official Designation Marana Official Designation Official Designation HENDRICKS
of Indiana dated the 23 day of Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and lighty— The State of Indiana, Groom William H. Withouth of were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS Circuit Court The se issued by the clerk of the Ind. 1981. authorizing the joining together as husband and wife Ind. 1981. authorizing the joining together as husband and wife Ind. 1981. authorizing the joining together as husband and wife Ind. 1981. authorizing the joining together as husband and wife Ind. 1981. authorizing the joining together as husband and wife Ind. 1981. authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Clerk Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Clerk Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife Ind. 1981. Authorizing the joining together as husband and wife

APPLICATION FOR MARRIAGE LICENSE

Opril 22, 1981
Date of Application

....Circuit Court

of I.C. 31-1-3-2	CATION FOR N	MARRIAGE LICENSE SCounty	Opril 22, 1981 Date of Application
Effective July 1, 1977		FEMALE Medical Examination Report D	Dated 4-21-81
MALE Medical Examination Report Dated 4-2/-8/		Name of Physician M.	regrespoda
Name of Physician M Languespools		Name of Taylor	y by any false statement, representation or pretens
1.0 21.1.3-6 prescribe	ed "False statement – Whoe	over procures the issuance of a	E ADDI ICANT
shall be fined in any sum not exceeding five hundred dollars (\$500.0) MALE APPLICANT	101		E APPLICANT Middle
Name /) First / Middle	MARKE	Name Dlul	L. Mortin
Date of Birth Day	Year	Date of Birth Month	24 1925
Tulk Co	1378	Place of Birth (State or foreign country)	In
	ounty State	Residence Address Street or R. R	
Residence Address Street or R. R. City Julia Julia	mapolis, In	1000	1
Previous Marital Status: Never Married □ OR		Previous Marital Status: Never Married O O Last Marriage Ended By: Death Divorce C	Annulment 🗆
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by: Birth Certificate	☐ Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree		Other (Specify)	en Lie W/Pic
Other (Specify) Medicaid Cord	7	Other (Specify) Are you now or have you ever been adjudged 1. Are you now or have you ever been adjudged	d to be of unsound mind? No D Yes I
1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes No Yes	1. Are you now or have you ever been adjudication been	
If answer is "yes", has the adjudication been removed?	No Pres D	Are you afflicted with a transmissible diseas	
2. Are you afflicted with a transmissible disease?3. Are you related to the female applicant closer than second cousin?	No □ Yes □	3. Are you related to the male applicant closer	than second cousin? No Yes
Are you now under the influence of intoxicating liquor?	No Ves 🗆	4. Are you now under the influence of intoxicat	
5. Are you now under the influence of a narcotic drug?	No Yes -	5. Are you now under the influence of a narcoti	
6. List the full names of any dependent children.		6. List the full names of any dependent children	
		7. Are you required by any court order or order	ers to support the above
7. Are you required by any court order or orders to support the above dependent children?	No Yes 🗆	dependent children?	No □ Yes I
If answer is "yes", it is required that this Application be accompanied by satisf	actory proof that you are in		plication be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.		compliance with any court order or orders is	issued for their support.
8. Full name of father (if deceased so state) Deceased		8. Full name of father	mans and
Residence of father (if deceased so state) Record	1.	Residence of father (if deceased so state)	/./ .
Birthplace of father (State or foreign country)	wee_	Birthplace of father (State or foreign country)	
9. Full maiden name of mother / Settle Chamford		9. Full maiden name of mother / NOV	na Edmonea Broy
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	leceosed
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country	Ry
	e the information given on is true and correct.	State of Indiana, County of HENDRICKS	ss: I depose and state the information give in this application is true and correc
Signed Plene L. Mar	40	Country of	^ .
		Signed.	word a some
New Address		New Address	Y C \ YOUCA
Subscribed and sworn to before me this		Subscribed and sworn to before me this	day of, 19
Clerk HENDR	Circuit Court		Clerk HENDRICKS Circuit Cou
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONCENT OF FIRM	
We, the parents, of this applicant hereby give consent for this marris	ave If only one perent	CONSENT OF PARENTS, PARENT OR	
signs, state facts which render the consent of the other parent unner			give consent for this marriage. If only one pare
		signs, state facts which render the conser	nt of the other parent unnecessary

State of Indiana			
State of Indiana, County of HENDRICKS ss:		State of Indiana,	
Signed		County of HENDRICKS	} \$8:
Signed		Signed	Fathe
Signed	Mother	Signed	Moth
Subscribed and sworn to before me this	, 19		day of19
	Clerk		Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY	ORDER OF COM		
COMPLETE IF MARRIAGE LICENSE ISSUED BY HENDRICKS County	C. C.	ourt by written order issued.	refused to the above named parties, the
in Superice # 2 authorizes and	directs the issuance	of a marriage license to the above nam	y Waster and file
RETURN OF	MARRIAGE LICENS	The AND are	ned parties.
Be It Remembered, there was filed in my of Indiana dated the aday of day of	office a marriage licer	E AND MARRIAGE CERTIFICATE	HENDRICKS Comit Con
of Inarana dated the day of day of	Peril	10 8%	Circuit Con
Be it further remembered, the following marriage certific	cate mas 61	and Olive authorizing t	the joining together as husband and wil
of Indiana dated the day of day of Be it further remembered, the following marriage certifications through the standard and the day of the standard and the sta	was filed in my	office, to-wit:	farm
one thousand nine hundred and State of Indiana, Groom and, Bride		nereby certify that on the 23	day of Opil
and Bride	faram	of Dunalle	County of Handricke
were by me united in married	of	Hondrike	County, State of
State of Indiana, Groom and, Bride and Wasten Were by me united in marriage as authorized by a marriage day of day of day.	age license issued for	that purpose by the G	County, State of Hid
Dated this day of day	2	oy the Clerk of the Circu	uit Court of HENDRICKS
	, 19	Signal	, M 2
Filed and recorded in accordance with the laws of the St		Official Designation	Maure 1
was of the St	ate of Indiana this	Just 1 - 1 - 1	age

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No// ₀ 3
File_
april 23, 1981
Date of Application
ort Dated (150.11,1981
u Newlers
marry by any false statement, representation or pretense
IALE APPLICANT
Middle Rutal Last
Day Year
And 1939
R. R. City County State
O OR
orce Annulment
ficate Udicial Decree
License
udged to be of unsound mind?
been removed? No□ Yes□
loser than second cousin? No Yes No Yes Yes
oxicating liquor? No Ves
arcotic drug? No 🖸 Yes 🗆
ildren.
orders to support the above
No□ Yes□
Application be accompanied by satisfactory proof that you are in ers issued for their support.
o C. Butcher
Alceased
try Mo.
tolla Nawyes
Alceased
ntry hist.
ss: I depose and state the information given in this application is true and correct.
nny LB. A.
Omesa
23 day of april 198/
Quasef Clerk HENDRICKS Circuit Court
OR GUARDIAN
eby give consent for this marriage. If only one parent
needs of the other parent unnecessary
Father
Mother
day of, 19
Clerk
n refused to the above named parties, the
and filed
amed parties.
TE UTAIDRICKS
HENDRICKS
HENDRICKS Circuit Court
the joining together as husband and wife
the joining together as husband and wife
the joining together as husband and wife
the joining together as husband and wife day of
day of County of County, State of D
day of County of County, State of D
day of

HENDRICKS

Circuit Court

	County _ April 23 108,
MALE Medical Examination Report Dated //- 8/	FEMALE Date of Application
Name of Physician and Limber	Medical Examination Report Dated, Apr. 11, 1981
AGENTIONS MUST BE ANSWERED LC 31-1-3-6 proposite to a	
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	Name of Physician Assaulter Source of a license to marry by any false statement, representation or pretense
MALE APPLICANT First Middle	
Name Tabert Wayne Stranger	Name Figst)
Date of Birth Day 1963	Date of Birth Month Buther
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 1959
Residence Address Street or R. R. City County State	Residence Kill
Previous Marital Status Never Married OR	Street or R. R. City County State
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	Other (Specify) La Luciuse
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes O	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes O	3. Are you related to the male and the second secon
4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐ No ☐ Yes ☐	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children? No Ves C	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father half by Colles Stranger	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) Alexand	8. Full name of father figures C. Dulelur
Birthplace of father (State or foreign country)	Residence of father (if deceased so state) Wellasta
9. Full maiden name of mother Saller ann Main	Birthplace of father (State or foreign country)
	9. Full maiden name of mother Allela Callelan
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana.	Birthplace of mother (State or foreign country) the State of Indiana,
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed Robert W. Stranger	Signed Renny L But he
New Address 46 OMEGO Lane	New Address 46 Omega
Subscribed and sworn to before me this 23 day of april 198/.	Subscribed and sworn to before me this 23 day of April 1981.
Mary and Trissell Gerk HENDRICKS Circuit Court	Mary Jane Lunself Clerk HENDRICKS Circuit Court
Clerk Clerk	- Company of the Comp
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 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	signs, state facts which render the consent of the other parent unnecessary
	3-
State of Indiana,	State of Indiana, HENDRICKS } ss:
County of HENDRICKS ss:	County County
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this	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 HENDRICKS	
inauthorizes and directs the issuance o	f a marriage license to the above named parties.
CONTO	AND MARRIAGE CERTIFICATE LIENDRICKS
RETURN OF MARRIAGE LICENSE	se issued by the clerk of the HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licender of Indiana dated the day of the second of Indiana dated the second of Indiana dated the second of Indiana d	, 19, authorizing the joining together as husband and wife
Beit Robert Dayne Stranger	nd tenny L. Duranta
u Jurther remembered, the following marriage certificate was filed in my of	nd
	County of
steasand nine hundred and	County, State of
State of Indiana, Groom Robert Wayne Stranger of and, Bride Penny L. Butches of	County, State of HENDRICKS
ou me unit 1	that party
Dated this day of The 19	
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation day of June , 19
ued and recorded in accordance with the laws of the State of Indiana this	10 day of Clerk Sind Wass Tane Rossell HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Date of Application

Form Prescribed By	N FOR MA	RRIAGE LICENSE	File 72
of I.C. 31-1-3-2	HENDRICKS	County	Date of Application
Effective July 1, 1977		FEMALE Medical Examination Report D	ated 4-23-81
MALE TO A Dated 4-23-81		Medical Examination Report 2. Name of Physician	Line in a said
Medical Examination Report Dated 4-2 S		Name of Physician	
Name of Physician O. Distriction ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement of the statement	atement — Whoever	procures the issuance of a license to marry	in any taise statement, representation or pre-
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-13-1 presented in any sum not exceeding five hundred dollars (\$500,00)".		FEMALE	
MALE APPLICANT	last	Name First	Middle Last
Name First Middle	- tops	Date of Birth Month	Day Year
Date of Birth Month Day		Place of Birth (State ox foreign country)	
Place of Birth (State or foreign country)	State	Residence Address Street or R. R.	City County State
Residence Address Street or R. R. City County		301 N Will	Loth. gra
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OF	R Annulment D
Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce Date of birth verified by: Birth Certificate	□ Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree			6
A Other (Specify) Deviers his upict		Other (Specify) Druse	to be of unsound mind? No X
Are you now or have you ever been adjudged to be of unsound mind?		 Are you now or have you ever been adjudged. If answer is "yes", has the adjudication been r 	
If answer is "yes", has the adjudication been removed:	No Yes O	2. Are you afflicted with a transmissible disease	7.4
2 Are you afflicted with a transmissible disease.	No DA Yes D	 Are you related to the male applicant closer to 	han second cousin" No No
4. Are you now under the influence of intoxicating liquor?		4. Are you now under the influence of intoxication	
5. Are you now under the influence of a narcotic drug?		 Are you now under the influence of a narcotic List the full names of any dependent children 	
6. List the full names of any dependent children.		6. List the full names of any dependent condens	
anada tellerett		may I s	
topical to complete		anger of	SAL AND SALE
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or order	s to support the above
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof the	No Yes I	dependent children? If answer is "yes", it is required that this Appl	lication be accompanied by satisfactory proof that you
compliance with any court order or orders issued for their support.		compliance with any court order or orders iss	
3. Full name of father Salie C. Full right		8. Full name of father Eventh	guar!
Residence of father (if deceased so state) Kung Linker Oak		Residence of father (if deceased so state)	Dad. Had.
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Ind.
Full maiden name of mother Dana J. Walter		9. Full maiden name of mother	hino Orcha
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	and
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country).	Sud.
State of Indiana, County of HENDRICKS Sa: I depose and state the inform in this application by true a	TRECEDIT KINETI	State of Indiana, HENDRICKS	ss: I depose and state the information in this application is true and co
4 1 11	12	County of	Jahren David
Signed Si	2.00	Signed X	Miller Jan Jan 1
New Address Subscribed and sworn to before me this Subscribed and sworn to be subscribed and sworn to sworn to be subscribed and sworn to sworn	suca cros	New Address 30/	The state of the s
Mac Jose Bussell - HENDRICKS		Subscribed and sworn to before me this	day of Devil 19
Clerk Clerk C	ircuit Court	Moone for prose,	Clerk HENDRICKS Circuit
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			give consent for this marriage. If only one p
signs, state facts which render the consent of the other parent unnecessary		signs, state facts which render the consent	t of the other parent unnecessary
	***************************************		***************************************
	***************************************		***************************************
			The state of the s
State of Indiana, County of HENDRICKS ss:		State of Indiana,	
		County of HENDRICKS	88:
Signed		Signed	F
Signed	Mother	Signed	
Subscribed and sworn to before me thisday of	19	Subscribed and sworn to before me this	dev of
	Clerk		day of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	OF COURT		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs the	Court	A marriage license having been r	refused to the above named parties,
in Seek's Office authorizes and directs the	he issuance of a	marriage license to the	day Warren and
RETURN OF MARRIAG	GE LICENSE	AND MARRIAGE CERTIFICATE	ed parties.
of Indiana dated the	3 - 11001136	issued by the clerk of the	HENDRICKS Circuit C
of Indiana dated the day of day of Be it further remembered, the following mayrings contif	2	1981 authorizing th	he joining together as hysband and
Be it further remembered, the following marriage certificate was possessing the state of the sta	filed in my offer	e tout	Le forming together as naodani san
one thousand nine hundred and.	her	eby certify that	0.00
one thousand nine hundred and State of Indiana, Groom.	at.	Daviel on the 24	day of Open
State of Indiana, Groom	of	Hand	County, State of Jud
were by me united in marriage as authorized by a marriage license Dated this	e issued for the	t purpose by the Clerk of the Circu	it Court of HENDRICKS
Dated this day of Reil	, 19 5		
		Signed	Jane Russell
Filed and recorded in accordance with the laws of the State of Ind	liana this	icial Designation.	Bed Ca
		day of	. D

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

MALE

STATE OF INDIANA

APPLICATION

FOR MARRIAGE	LICENSE	
HENDRICKS	CLICENSE	

County -24-81 Date of Application FEMALE Medical Examination Report Dated____ Name of Physician_

Medical Examination Report Dated_ 4-24-81 Name of Physician_ ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense MALE APPLICANT FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married OR Last Marriage Ended By Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O If answer is "yes", has the adjudication been removed? No Yes O No Tyes If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? No Tyes No Yes 2. Are you afflicted with a transmissible disease? ou related to the female applicant closer than second cousin? No X Yes No Yes 3. Are you related to the male applicant closer than second cousin No ▼ Yes □ you now under the influence of intoxicating liquor? No Y Yes 4. Are you now under the influence of intoxicating liquor? No Yes 🗆 ou now under the influence of a narcotic drug? No Yes 🗆 6. List the full names of any dependent children. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No T Yes No TYes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their suppor Residence of father (if deceased so state) Birthplace of father (State or foreign country) 9. Full maiden name of mother Elizabeth Residence of mother (if deceased so state)_ Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country)_ State of Indiana, HENDRICKS HENDRICKS New Address RR6 Box 233 Marville In Subscribed and sworn to before me this 24 day of Quel, 1981. 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 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... signs, state facts which render the consent of the other parent unnecessary... State of Indiana. HENDRICKS HENDRICKS Father Signed. Mother Signed day of..... .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...... HENDRICKSCounty.... ...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 authorizing the joining together as husband and wife of Indiana dated the. 28 day ofand..... lole Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the day of May Daville , County of L. Dales one thousand nine hundred and State of Indiana, Groom Salty were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County. County. Dated this. Official Designation. .Clerk 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

4-24-81 FEMALE Medical Examination Report Dated___ 4-24-81 Thomas N. Black III MALE Medical Examination Report Dated____ Name of Physician_ Thomas H. Black III ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretens shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT Martin Date of Birth 938 RRI Opt Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree 1. Are you now or have you ever been adjudged to be of un 1. Are you now or have you ever been adjudged to be of unsound mind? No D Yes D If answer is "yes", has the adjudication been removed If answer is "yes", has the adjudication been removed No Yes D 2. Are you afflicted with a transmissible disease 2. Are you afflicted with a transmissible disease Are you related to the male applicant closer than second cousing 3. Are you related to the female applicant closer than second cousin Are you now under the influence of intoxicating liquor Are you now under the influence of intoxicating liquor? now under the influence of a narcotic drug? Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children Are you required by any court order or orders to support the above No D Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana. State of Indiana, depose and state the information given n this application is true and correct. HENDRICKS HENDRICKS County of 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, State of Indiana, HENDRICKS County of .. HENDRICKS County of Signed..... Subscribed and sworn to before me this ______day of ______, 19.____ 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 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..... Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the _____day 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 Dated this......day of......, 19......,

Signed....

... Circuit Court

HENDRICKS

Signed....

..Clerk

... Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority

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

APPLICATION FOR A

167

of LC 31 1.3-2 Effective July 1, 1977 HENDRIC	MARRIAGE LICENSE
Effective July 1. 1977	CKS County File // 27 C/
MALE	- 7-d/-8/
Medical Examination Report Dated 4-27-81	FEMALE Date of Application
Name of Physician Grving Cohen	Medical Examination Report Dated 4-27-81
ALL QUESTIONS MUST be ANSWERED, IV. 31-13-6 prescribed "False statement—When the lined in any sum not exceeding five hundred dollars (8500,00)".	Name of Physician Acung Colen noever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	a ficense to marry by any false statement, representation or pretense
Name First Middle Of Last	Name # FEMALE APPLICANT
Date of Birth Month Day Fear	Wirst Middle C 2 last
Place of Birth (State or foreign country)	Date of Birth Month Day Won gomery
Camelon Co. And	Place of Birth State or foreign country) 18 1954
Residence Address Street or R. R. VSS Scattle (AOE-3) 100 New York County State	Residence Address Street or R. R. City
100 40	618 Buchannon All County State
Previous Marital Status. Never Married OR Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Date of Colonia	Date of birth verified by: Birth Certificate U Judicial Decree
Other (Specify) & W. W/ Picture (Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D	Other (Specify) Drivers decense u/picture
If answer is "yes", has the adjudication been removed? No D Yes D	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease" No Wes D	2. Are you afflicted with a transmissible at
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closes the
4. Are you now under the influence of intoxicating liquor? No to yes No to	4. Are you now under the influence of intoxicating liquor? No Yes Yes Yes
Are you now under the influence of a narcotic drug? No B Yes D List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
Michael Jon Montgomery	6. List the full names of any dependent children.
- Tonigomery	Michael Jon Montgomery
	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No D Yes D	dependent children? No Ves
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Wark Welpora, Shring it &	compliance with any count order or orders issued for their support.
0.000	8. Full name of father fact - Mortgonery
Residence of father (if deceased so state)	Residence of father (if deceased so state) Plainfield Ind
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country One polis Ind
9. Full maiden name of mother Evelyn - Meley	9. Full maiden name of mother. Eurice Merle Lee
Residence of mother (if decreased so state) Snolplo Sno.	Occared
Birthplace of mother (State or foreign country) Conthianna PU.	Residence of mother (if deceased so state)
State of Indiana.	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.	County of HENDRICKS as: I depose and state the information given in this application is true and correct.
Sund & Hank Denn Sungert	L'and Sue Montemers
11 AS & Hair Start PO 1-10 0 0	Signed & Work St. K. P. V. 100 V
New Address 1645 E- Main Street, Plainfield, and	New Address 1645 E. Wain Theel, Plainkell, Ind.
Subscribed and sworn to before me this day of Cloud 1901.	Subscribed and sworn to before me this. day of day of 19
The pene Russellerk HENDRICKS Circuit Court	Mary and Russell Clerk HENDRICKS Circuit Court
	A THE REPORT OF THE PARTY OF TH
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 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	signs, state facts which render the consent of the other parent unnecessary
St. v. v. v.	
State of Indiana. County of HENDRICKS } ss:	State of Indiana, HENDRICKS } ss:
	County of
Signed	Signed Father
Signed Mother	Signed Mother
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of, 19
	Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS County Supplement IF Cou	urt by written order issued
in Clark' authorizes and directs the issuance of	f a marriage license to the above named parties.
PETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a magriage licens	se issued by the clerk of the
	in Y I muthorizing the following vog
and the Company of the second	nd Sandan
Be it further remembered, the following marriage certificate was filed in my of	rereby certify that on the
	County of Thomas
State of Indian	County, State of
and Paris	County, State of County, State of
vere by me united in marriage as authorized by a marriage license issued for the	hat murpose by the Clerk of the Circuit Court of HENDRICKS
County.	
Pated this 28 day of Opil , 1981	
ady of	Designation Minister
	ifficial Designation, 19.01

Signed ..

APPLICATION FOR MARRIAGE LICENSE

Date of Application

HENDRICKS

... Circuit Court

LICK IDDIC	MARRIAGE LICENSE KS County File (Pil 27/198/ Date of Application
f I.C. 31-1-3-2 Effective July 1, 1977 HENDRICE	T. Producti
1/2/8/	FEMALE Medical Examination Report Dated 4-21-81
MALE Medical Examination Report Dated 1/-2/-8/	Name of Physician J. Jovall
Name of Physician J. Jovoll	Name of Physician 200
N. ANGUERED 10 31-1-3-6 prescribed "False statement - water	pever procures the issuance of a license to marry by any false statement, representation or pret
hall be fined in any sum not exceeding the	FEMALE APPLICANT
MALE APPLICANT Last Middle Last	Name Stary Joanne Clement
Mortin Thoolus Summers you	Date of Birth Month 29 1963
ate of Birth Month Bay 1962	Place of Birth (State of foreign country)
Place of Birth (State or foreign country)	Residence Address Street or R. R. Cay County State
esidence Address Street or R. R. Pittsbow State RRI Box 25 A Pittsbow Snd.	RP# 120 03 10000 go
revious Marital Status: Never Married OR	Previous Marital Status: Never Married OR
ast Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
ate of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by.
Other(Specify)	Other (Specify)
Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? Now Y
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No y 2. Are you afflicted with a transmissible disease?
Are you afflicted with a transmissible disease? No Yes No Yes	2. Are you afflicted with a transmissible disease. 3. Are you related to the male applicant closer than second cousin? No you
Are you related to the female applicant closer than second cousin.	4. Are you now under the influence of intoxicating liquor?
Are you now under the influence of intoxicating liquor? No W 198 D No W 198 D	5. Are you now under the influence of a narcotic drug?
List the full names of any dependent children.	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes	dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that your
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	compliance with any court orders or orders issued for their support.
Full name of father Mortis Thodas Summers	8. Full name of father John Wayne Clements
Residence of father (if deceased so state) Pellslowe, Ind	Residence of father (if deceased so state) North Salen , Ind
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Indiana
Full maiden name of mother Mory Collerine Woods	9. Full maiden name of mother Patti Joonne Courtney
Residence of mother (if deceased so state) Pittsbow, And	We the Solver I.
	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information of
County of HENDRICKS 88: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information in this application is true and contain the same and same an
Signed Martin T Summers In	Signed Stacy & Clements
New Address RR 1 Box 156 Ligton In.	New Address RR Box 156 Ziztin
Subscribed and sworn to before me this 27 day of Opril 185/	Subscribed and sworn to before me this 21 day of Office 19
Mary Jano Russell Clerk HENDRICKS Circuit Court	Mary Jone Russell Clerk HENDRICKS Circuit
U /	Clerk Circuit
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one parents
igns, 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 I. 3.
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed Father	111 1 24 1000000
Signed	Signed! Soft Fr
Subscribed and sworn to before me this	Signed Patter J. Clanes M
	Subscribed and sworn to before me thisday of, 19
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties,
County	Court by written order issued and
and insulance	of a marriage license to the above many li
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	ense issued by the clerk of the HENDRICKS Comparit (
Mostin T. Summar	ense issued by the clerk of the HENDRICKS Circuit Common, 19 % authorizing the joining together as husband and
Be it further remembered, the following marriage certificate was filed in my	and office, to-wit
, Robert a Miner	office, to-wit: hereby certify that on the Say of May
one thousand nine hundred and	hereby certify that on the Say of County of Hand
were by me united in marriage as authorized by a marriage license issued for	of Hard, County of Hard
vere by me united in marriage and the state of	Hand County, State of Jud
Dated this day of Marriage license issued for 198	HENDRICKS HENDRICKS
, 19	?V
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Desociate Parts
and that recorded in accordance with the last	

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

11 2801

THE	Date of Application
MALE Medical Examination Report Dated 4-23-81	FEMALE
Name of Physician Clum Edwards	Medical Examination Report Dated 4-23-8
	Name of Physician Um Edwards
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a light
MALE APPLICANT	a neense to marry by any false statement, representation or pretense
Name First Middle CO Last	FEMALE APPLICANT
Muchael a. Kenkhart	Name Ast Middle Last
Date of Birth Month Day Year	Date of Birth Mari
Place of Birth (State or foreign country)	Place of Birth (St.)
Residence Address Street or R. R. City County State	Place of Birth (State or toreign country)
Residence Address 1600 CarburgRd Morresville Moyan State	Residence Address Street or R. R. City County State
Previous Marital Status Never Married OR	Box 39 Clayton soul Ind
Previous Marital Status Several Status	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drewers License Wpicture	of Dian 1 - 111
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) Drivers Licenso Upicture
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Syes D	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent enforcem	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support,	compliance with any court order or orders issued for their support.
8. Full name of father Harvey Lee Richart,	8. Full name of father William Ronald Woods
Marin Ma. 1-2	
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Callyformua	Birthplace of father (State or foreign country) Jennessee
9. Full maiden name of mother Marie Jeresa St. Martin	9. Full maiden name of mother Mystle Mayerine Busel
Magaziala	Indiana
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Tell Orleans	Birthplace of mother (State or foreign country) Annexite
State of Indiana.	State of Indiana, HENDRICKS 88: I depose and state the information given in this application is true and correct.
County of HENDRICKS ss: in this application is true and correct.	County of
Michael - L. Rehland	Signed Leggy & Woods
Signed	1/200 Marlina RD.
New Address 1000 (goods 50)	New Address
Subscribed and sworn to before me this 20 day of Clorid 191.	Subscribed and sworn to before me this. day of the day
Mary are Persell Clerk HENDRICKS Circuit Court	Mary are Reisser HENDRICKS Circuit Court
CONGRATION	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 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
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,	State of Indiana, HENDRICKS ss:
County of HENDRICKS ss:	County of
	Signed
Signed Father	SignedMother
Signed Mother	day of
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of
	Clerk
Clerk	Il shows to the shove named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above hamed parties, the
HENDRICKS COUNTY COUNTY	ourt by written order issued
in County	of a marriage license to the above named parties.
ICENS	EF AND MARKIAGE CERTIFICATION HENDRICKS Circuit Court
The The man stand of the man office a martinge were	the joining together as hasband and well
of Indiana dated the 5 day of The July	nse issued by the clerk of the
Be it further remembered, the following marriage certificate was filed in my	day of day of
1, Men ford Landweller	nereog certify
A STATE OF THE PARTY OF THE PAR	at Marie all and a state of What
State of Indiana, Groom Manual Richhart	of Herdricks County, State of Hendricks
and, Bride of Indiana, Groom of of	Hendricks HENDRICKS
were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court
County.	Culture 1 . 2 . 1
Dat 1	The state of the s
day of	Official Designation , 19 81.
	Ometat Decis.
Filed and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court
Tecorded in the land	HEINTRICA Cinaunt Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

County

42

4-28-81

Form Prescribed By Indiana State Board of Health under Authority HENDRICKS Date of Application of I.C. 31-1-3-2 Effective July 1, 1977 Medical Examination Report Dated 4-24-8 4-24-81 Name of Physician Wolliam MALE Medical Examination Report Dated ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretens shall be fined in any sum not exceeding five hundred dollars (\$500,000". MALE APPLICANT Name Last Middle First Date of Birth Day Date of Birth Place of Birth (State or foreign Place of Birth (State or foreign country) Residence Address Previous Marital Status: Never Married 🗖 OR RR1 Last Marriage Ended By: Death □ Divorce □ Annulment □ Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: A Birth Certificate Udicial Decree Date of birth verified by: 💆 Birth Certificate 🗆 Judicial Decree Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No X Yes D No A Yes 1. Are you now or have you ever been adjudged to be of unsound mind If answer is "yes", has the adjudication been removed No Tyes O No Yes If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease No A Yes No A Yes 2. Are you afflicted with a transmissible disease? 3. Are you related to the male applicant closer than second cousin No Yes No M Yes 3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor No Yes D No Yes Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes No R Yes 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 6. List the full names of any dependent children. Are you required by any court order or orders to support the above dependent children? Are you required by any court order or orders to support the above No Tyes No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support compliance with any court order or orders issued for their support. 8. Full name of father____ Residence of father (if deceased so state) Residence of father (if deceased so state) Birthplace of father (State or foreign country). 9. Full maiden name of mother Expl Residence of mother (if deceased so state) Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) I depose and state the information given State of Indiana, State of Indiana, depose and state the information given this application is true and correct. County of Jana Reissels Gerk HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary... State of Indiana, State of Indiana, HENDRICKS County of .. HENDRICKS County of Signed. Father Signed. Mother COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued...... ...authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the...... .Circuit Court day of Mary HENDRICKS of Indiana dated the, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: . Varaha one thousand nine hundred and S State of Indiana, Groom Roughond and, Bride Jones & JanahaCounty, 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 ofCounty, State of

Official Designation

Circuit Court

HENDRICKS

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

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

HENDRICKS

Circuit Court

MALE Broad Day 2/ 2/2 9/	Date of Application
Medical Examination Report Dated 4-25-81	FEMALE
Name of Physician Michael Duly M.D.	Medical Examination Report Dated 4-25-8/
ALL QUESTIONS MUST BE ANSWERED. LU. 31-1-3-6 prescribed "False state	Name of Physician Machael Melly M.D.
shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	oever procures the issuance of a license to marry by any fel
Private Add to the Add	
Name Walk a Shoot last	Name First FEMALE APPLICANT
Date of Birth Month Day Year	Middle Clark
Place of Birth (State or (Scrign country)	Date of Birth Monda M. Lewis
Problem Address Street or R. R. City	Place of Birth (State or foreign country)
Residence Address Street yr R. R. City County State 1	Residence All Scottala
Previous Marital Status: Never Married OR	Street or R. R. City County State
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of Dirth vermed by	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D	Other(Specify)
If answer is "yes" has the adjudication been removed? No D Yes D	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Wes D	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No P Yes D	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes O	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes D	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children' No□ Yes□	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support	compliance with any court orders or orders issued for their support.
8. Fill name of father Cardie . Looden	8 Full name of father Charles Lewis
Residence of fathers if deceased so states Protonsbulg In.	Residence of father (if deceased so state) Liston In .
Birthplace of father (State or formign country) Resetus ku	0, 1,
9. Full maiden name of mother athering L. Fringer	Birthplace of father (State or foreign country)
9. Full maiden name of mother consuming of Sugar	9. Full maiden name of mother Ursula 6 mglest
Residence of mother (if decreased so state) Distundburg on.	Residence of mother (if deceased so state) Total , In .
Birthplace of mother i State or foreign country Indiana	Ellest Germany
State of Indiana.	Birthplace of mother (State or foreign country) State of Indiana,
County of HENDRICKS sa: in this application is true and correct.	County of HENDRICKS I depose and state the information given in this application is true and correct.
Mark Gardin	Unda Unio
4508 (01 + 6: 0+	Signed Signed South O' No. 100
New Address 100 Candlelier Cir. Apt 19	New Address 4508 Canalletree Cir Apt 19
Subscribed and sworn to before me this Ith day of May . 19.01.	Subscribed and sworm to before me this SITA day of Upril , 1951.
Thany fine fussell derk HENDRICKS Circuit Court	Mary Jane Hussell Clerk HENDRICKS Circuit Court
	Circuit Court
	1 July Jene A Washell Clerk Till Volters Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant beachs give control for this province. If only one parents	CONSENT OF PARENTS, PARENT OR GUARDIAN
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We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.
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We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day 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 of Signed Father Signed Mother 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 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: The second consent for this marriage. If only one parent signs, and the signs of the other parent unnecessary. County of HENDRICKS And HENDRICKS County of Mother Subscribed and sworn to before me this day of the other parent unnecessary.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed
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We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. County of HENDRICKS } as: Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Cou	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the 19 mathematical and wife LINDA M.LEWIS LINDA M.LEWIS CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed in this marriage. If only one parent was read and wife consent of the other parent unnecessary. Father State of Indiana. And Mother Subscribed and sworn to before me this day of 19 Clerk Clerk Circuit Court LINDA M.LEWIS MAY
We, the parents, of this applicant hereby 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 day of 19	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk C. A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the source particular to the pointing together as husband and wife LINDA M. LEWIS d. LINDA M. LEWIS firety certify that on the 16th day of MAY PROWNSBURG , County of HENDRICKS County of HENDRICKS
We, the parents, of this applicant hereby 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 day of 19	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Clerk Clerk A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court e issued by the clerk of the 19 Junior and the pointing together as husband and wife LINDA M.LEWIS d LINDA M.LEWIS d LINDA M.LEWIS County of HENDRICKS
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We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS Signed Signed Subscribed and sworn to before me this County County MARK A. GOODIN MARK A. GOODIN MARK A. PAPPANO One thousand nine hundred and State of Indiana, Groom MARK A. GOODIN MARK A. GOODIN MARK A. GOODIN MARK A. GOODIN State of Indiana, Groom MARK A. GOODIN MARK A. GOODIN MARK A. GOODIN State of Indiana, Groom MARK A. GOODIN MARK A. GOODIN MARK A. GOODIN State of Indiana, Groom MARK A. GOODIN MARK A. GOODIN MARK A. GOODIN State of Indiana, Groom MARK A. GOODIN	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 Clerk A marriage license having been refused to the above named parties, the rt by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to its sued by the clerk of the se issued by the clerk of the labove named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to labove named parties issued by the clerk of the labove named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to labove named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to labove named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to labove named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to labove named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to labove named parties.
We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS Signed Signed Signed Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County County RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license of Indiana dated the MARK A. GOODIN Be it further remembered, the following marriage certificate was filed in my office, and my office and my 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, 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 Signed Signed Signed Signed Mother Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County in authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE of Indiana dated the MARK A. GOODIN Be it further remembered, the following marriage certificate was filed in my office. WILLIAM A. PAPPANO one thousand nine hundred and State of Indiana, Groom MARK A. GOODIN and State of Indiana, Groom MARK A. GOODIN State of Indiana, Groom MARK A. GOODIN MARK A. GOOD	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 day of parent clerk C. A marriage license having been refused to the above named parties, the ret by written order issued and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE e issued by the clerk of the pointing together as husband and wife a LINDA M. LEWIS ice, to-wit: The propose by the Clerk of the Circuit Court of HENDRICKS County, State of IN HENDRICKS AND MARRICKS County, State of IN HENDRICKS HENDRICKS County, State of IN HENDRICKS TO APPRANCE. The parents are the consent for this marriage. If only one parent wince parents and signs are the clerk county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county of HENDRICKS The parents are the consent of the county o
We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS } sa: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County in authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE ISSUED STATE of Indiana dated the MARK A. GOODIN and Se it further remembered, the following marriage certificate was filed in my office on my office on the county one thousand nine hundred and State of Indiana, Groom MARK A. GOODIN and, Bride LINDA M. LEWIS of mere by me united in marriage as authorized by a marriage license issued for the County. Dated this 16th day of MAY 19.81	CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary
We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. County of HENDRICKS } sa: 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

APPLICATION FOR MARRIAGE LICENSE

... Circuit Court

Form Prescribed By	ATION FOR MA	ARRIAGE LICENSE	File	12
Health under Authority	HENDRICKS	County	Li - a	28-81
of I.C. 31-1-3-2 Effective July 1, 1977			Date	of Application
		FEMALE Medical Examination Repo	rt Dated 4-6	-81
MALE Medical Examination Report Dated	81		Soudder	
112041011		Name of Physician		
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed dollars (8500.00	"False statement - Whoeve	r procures the issuance of a license to n	narry by any false statement	t, representation or pretens
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed shall be fined in any sum not exceeding five hundred dollars (\$500.00)	n".	FEM	ALE APPLICANT	
MALE APPLICANT		Name First	Middle	C D Last
Name First Middle	Oakley -	Date of Birth Month	Day	JOHNSON .
Date of Birth Month Day	Year	10	23	228
Place of Birth (State or foreign country)		Place of Birth (State or foreign county	Law	
Court	nty State	Residence Address Street or	Rd. PILL	County State
Residence Address Street or R. R. 1354 Vaufan Indeed		Previous Marital Status Never Married	M OR	
Previous Marital Status: Never Married OR		Last Marriage Ended By Death Dive	arce Annulment	
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by Birth Certifi	icate D Judicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree		other (Specify) D No.		
Other (Specify) Drivera La		Other (Specify)	ser de	%
Are you now or have you ever been adjudged to be of unsound mind?	No R Yes	1. Are you now or have you ever been adju		No A Yes C
If answer is "yes", has the adjudication been removed?	No□ Yes□	If answer is "yes", has the adjudication in 2. Are you afflicted with a transmissible d		No □ Yes □
2. Are you afflicted with a transmissible disease?	No 🔼 Yes 🗆	2 Are you afflicted with a transmission of 3 Are you related to the male applicant of		No Yes C
3. Are you related to the female applicant closer than second cousin?	No ♥ Yes □	Are you now under the influence of into		No Of Yes C
4. Are you now under the influence of intoxicating liquor?	No A Yes□	5. Are you now under the influence of a na		No A Yes
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.		6. List the full names of any dependent ch		
o. Electric termination of any department of the control of the co				
		7 Are you required by any court order or	orders to support the above	
Are you required by any court order or orders to support the above dependent children?	No □ Yes □	7 Are you required by any court order or dependent children"	The same and the s	No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfac	tory proof that you are in	If answer is "yes", it is required that this	Application be accompanied by	satisfactory proof that you are
compliance with any court order or orders issued for their support.		compliance with any court order or order	ers issued for their support	
8. Full name of father 1999		8. Full name of father Salar	To faring	1
Residence of father (if deceased so state)	2rd	Residence of father (if deceased so state)	boly. o	eid.
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign cour	ntry Down.	
9. Full maiden name of mother Donas R. Decor	nel	9 Full maiden name of mother SA	. De julie	dister
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	Saule.	
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign cou		>
State of Indiana, I denose and state	the information given	State of Indiana.		state the information give
	is true and correct.	County of HENDRICKS		cation is true and correc
Signed & Bey Couly		Signed A	arsha D. J	ohnson
New Address 4845 Avon Road	Pfield In	45	845 dron i	Road Pfield
Subscribed and sworn to before me this and day of	Beliaf	New Address	28	18. 1:00
Many Jane Russell Clerk HENDRIC	CKS	Subscribed and sworn to before me thi	A day of	IDDICUS INST
Clerk III VDAN	Circuit Court	whom have we	Clerk HE	NDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT	OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriag	ge. If only one parent			annings to only one page
signs, state facts which render the consent of the other parent unnece		We, the parents, of this applicant her		
partit differen		signs, state facts which render the co	onsent of the other parent	un necessary
				THE RESERVE OF THE PROPERTY OF
	ALC:			
			······································	CO-CARLORIA CARROLLI PROPERTO ANTO ARREST ARREST CONTRA
State of Indiana, County of HENDRICKS ss:		State of Indiana,		
outing of		County of HENDRICKS	88:	
Signed		Signed		Fathe
Signed	Mother		The state of the s	Moth
Subscribed and sworn to before me thisday of		Subscrib	***************************************	Partition of the second
	Clerk	Subscribed and sworn to before me the	is day of	приняти принят
		3- 12- 11- 11- 11- 11- 11- 11- 11- 11- 11	ON THE PARALLEL SECTION (III - MODINE (1980) VERY - THE	Clel
COMPLETE IF MARRIAGE LICENSE ISSUED BY HENDRICKS County	ORDER OF COURT	A marriage license having	on referred to the	wa named parties, th
HENDRICKS County	Cou	t by written order issued	en refused to the abo	and file
additionizes and (directs the issuance of	a marriage license to the above	named perties	12 11 19 19 19 19 19 19 19 19 19 19 19 19
Be It Remembered the RETURN OF M	ARRIAGE LICENSE	AND MARRIAGE CERTIFICA	named parties.	
			HENDRICKS	Circuit Cour
of Indiana dated the day of Be it further remembered, the following marriage certifical.	II Jon	1981	TO TORICKS	to the and wit
Be it further remembered, the following marriage certification	ate was flad: and	ce, to-wit:	the joining together	r as husbana and wy
1, Duce a blown	was fued in my offi	ce, to-wit:	9 July	***************************************
one thousand nine hundred and &	he	reby certify that on the	day of M	Dep
State of Indiana, Groom Keith E. Oak	ley	mbd.	County of	Hand
ana, Brace and and by Johnson) (Ho. Duon	County, State of	Graf
one thousand nine hundred and S. State of Indiana, Groom S. State of Indian	ge license issued for	at a second	County, State of	Ind
were by me united in marriage as authorized by a marriage. County. Dated this day of	tooded for th	at purpose by the Clerk of the C	ircuit Court of	HENDRICKS
Dated this day of Many and Day	5			
			ea, Bio	John Marine
Filed and recorded in accordance with the laws of the Stat	te of Indiana this	ncial Designation Pa	stor	***************************************
	this	day of		18

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

Circuit Court

Effective July 1. 1977	KS File 42
MALE	
MALE Medical Examination Report Dated 4-26-81 Name of Physician 4 3 8 wko Chiw	FEMALE Date of Application
Name of Physician & B & Nake Chin	Medical Examination Report Dated \\\\ -18-81
Name of Any	Name of Physician & Lake Chic
ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a line
MALE APPLICANT	Il a needs to marry by any false statement, representation or pretense
Name First Middle Last	Name PEMALE APPLICANT
Date of Birth Month Day Year	First Middle Last
Place of Birth (State or Toyeign country)	Date of Birth Month Day
	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Resident 13
Previous Marital Status Never Married OR	R 3 Box 3 21 AA Baner la Viate
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death □ Divorce Annulment □
	Date of birth verified by: Birth Certificate Judicial Decree
A Other (Specify) D. S. Which	A Other (Specify) D. J. W. Piol.
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes -	1 Are you now on b
If answer is "yes", has the adjudication been removed? No D Yes D	1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes If answer is "yes", has the adjudication been removed? No Ves
2. Are you afflicted with a transmissible disease?	2 Are you office a to
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No X Yes D No X Yes D	3. Are you related to the male applicant closer than second cousin? No ⋈ Yes □
1.0 1 168	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
More	6. List the full names of any dependent children.
	Waro
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Delian and Sular	compliance with any court order or orders issued for their support. 8. Full name of father Robert R
Residence of father of deceased so state) & Juna July	D. College
	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Todamany I'l Canall	9. Full maiden name of mother Donna C. Boasley
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Land Houte Ind.
Birthplace of mother (State or foreign country	Birthplace of mother (State or foreign country) Wishing
State of Indiana.	Control of the Contro
County of HENDRICKS as: in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed fight of Jyler	Signed Milla R. Coppolk
New Address R3 BX 32/ MA Damelle IND	New Address RR3 Boy 321AA Nanville Ind
Subscribed and sworn to before me this 29 day of Quil 198.	Subscribed and sworn to before me this and day of Qual 19 El
	HENDRICKS
Clerk HENDRICKS Circuit Court	Clerk 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 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
signs, state facts which render the consent of the other parent unnecessary.	signs, state facts which render the consent of the other parent diffecessary
State of Indiana.	State of Indiana,
County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
	SignedFather
Signed	Signed
Signed Mother	
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 19
	Clerk
COMP	The marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been result to and filed and filed and filed
HENDRICKS County Cou	f a marriage license to the above named parties.
authorizes and directs the issuance of	a marriage needs to the control of t
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens	Se issued by the state of the soining together as husband and wife
of Indiana dated the day of the	Socal R coop
Be it further remembered, the following marriage certificate was filed in my of I, h	ereby certify that on theday of
one thousand nine hundred and	it Indoles , county of Ind
State of Indiana Co	County, State of County
State of Indiana, Groom of Coppeled of	County, State of HENDRICKS
were by me united in marriage as authorized by a marriage license issued for to County.	hat purpose by the Clerk of the Circuit Court of
County.	2.2 2
Dated this day of 19	Signed Signed
	Official Designation 1981
	James Marie
Filed and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

... Circuit Court

of I.C. 31-1-3-2	ION FOR M HENDRICKS	ARRIAGE LICENSE	Annual Contract of the Contrac	4-30-81 of Application
Effective July 1, 1977		FEMALE	U	4-81
MALE 4-14-8		Transport Report	A. 1 50 54 -	The same of the sa
Medical Examination Report Dated	als	Name of Physician West	ery by any false statemen	A. representation or protect
Name of Physician Colevary ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "Fal ALL QUESTIONS MUST BE ANSWERED in the prescribed pres	se statement - Whoev	er procures the issuance of a field	LE APPLICANT	Privers
shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT		First	Middle	Aast
	Jughlin -	Name Laura	Day	Nouseff
Killie Time	ar	Date of Birth Month	/	1959
Date of Birth Month Pay	58	Place of Birth (State or foreign country)	Ind	
Place of Birth (State on foreign country)	State	Residence Address Street or R.	R. City	Squarty State
Residence Address Street or R. P. OOOE Boury Dens	1. State	Residence Russes 2		Merco. Sond
5240 11.10		Previous Marital Status: Never Married	OR C	
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D	,	Last Marriage Ended By: Death Divorce Date of birth verified by: Birth Certificat	Annulment C	
Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certifical	E Suddies Interes	
Drivers Licing ul/picte	TIAD _	□ Other(Specify)		
Other (Specify)	No Yes 🗆	1. Are you now or have you ever been adjudge		No ₩ Yes
1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No□ Yes□	If answer is "yes", has the adjudication bee		No D Yes
2. Are you afflicted with a transmissible disease?	Now Yes	2. Are you afflicted with a transmissible dise		No Yes
Are you related to the female applicant closer than second cousin?	No W Yes	3. Are you related to the male applicant close		No E Yes
4. Are you now under the influence of intoxicating liquor?	No Ves	Are you now under the influence of intoxic Are you now under the influence of a narco		No G Yes
5. Are you now under the influence of a narcotic drug?	No Yes D	Are you now under the influence of a market List the full names of any dependent children		, 10
6. List the full names of any dependent children.		V. Distriction of the control of the		
			- 11.7.	
			No Control	
7. Are you required by any court order or orders to support the above	No □ Yes □	 Are you required by any court order or order dependent children? 	iers to support the above	No□ Yes
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory p		If answer is "yes", it is required that this A	pplication be accompanied by	
compliance with any court order or orders issued for their support.	`	compliance with any court order or orders		
8. Full name of father James Laurence Cou	ghler	8. Full name of father John	- Dossiff	1
Residence of father (if deceased so state) Brownsburge	no.	Residence of father (if deceased so state)	Indple de	· .
Birthplace of father (State or foreign country) Quelos One		Birthplace of father (State or foreign country	Indplo 0	Inel
The inflate of father (state of foreign country)	M	B	the Mario	nistal shell
9. Full maiden name of mother Trylls and Robbit	0	9. Full maiden name of mother	Indpl I	00
Residence of mother (if deceased so state) Prownsburg		Residence of mother (if deceased so state)	Section -	Su 1
Birthplace of mother (State or foreign country) Tanggart Jenn	issel	Birthplace of mother (State or foreign counti	yackson,	Michigan
State of Indiana, County of HENDRICKS Sas: I depose and state the in this application is t	nformation given rue and correct.	State of Indiana, County of HENDRICKS	ss: I depose and in this appl	i state the information give lication is true and corre-
	0.	7 - 9	1 0	De selve
Signed X Steven J. Cought	in	Signed	auray f.	Carry)
New Address SPEEDWAY, LA	1 0	New Address	reedway	
Subscribed and sworn to before me this 30 day of Aral		Subscribed and sworn to before me this	GO day of	aprel 198
Transfer Clerk HENDRICKS	Circuit Court	Il lary pore R	USSERVOIER HE	NDRICKS Circuit Cou
CONSENT OF PARENTS, PARENT OR GUARDIAN				
		CONSENT OF PARENTS, PARENT OF	R GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If		We, the parents, of this applicant hereb	y give consent for this r	marriage. If only one pare
signs, state facts which render the consent of the other parent unnecessary	*******************************	signs, state facts which render the cons	ent of the other parent	unnecessary
			*********************************	***************************************
			***************************************	***************************************
State of Indiana, HENDRICKS		State of Indian		
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	} ss:	
Signed	Father			
Signed		Signed	***************************************	Fath
Subscribed and sworn to before me thisday of	Mother		***************************************	Moth
uay oiuay	19	Subscribed and sworn to before me this.	day of	, 19
	Clerk			Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORD	DER OF COURS	P. A.		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORI HENDRICKS County	OF COUR	1. A marriage license having been	refused to the ab	ove named parties, th
in authorizes and direct RETURN OF MARK	cts the issuance of	f a manni-		and file
PETUDN OF MAN	one issuance of	a marriage license to the above na	amed parties.	
Be It Remembered, there was filed in west	RIAGE LICENSE	AND MARRIAGE CERTIFICAT	O EO	
of Indiana dated the	\ J = ttoon,	se issued by the clerk of the	HENDRICKS	Circuit Cou
Dreven J. Coughlin		, 198 authorizing	the joining togethe	r as husband and wi
1. Dennis R. Frank arriage certificate i	was filed in my o	fice, to-wit:	eff	*******************************
				1000
one thousand nine hundred and State of Indiana, Groom Steven J. Coughlin and, Bride Lauca J. Dessett were by me united in marriage as authorized by		it. Indols	day of	Marion
and, Bride Laura J. Dossell		of Hand.	County of	Tad
were by me united in marriage as authorized !	of	Hand	County, State of.	Tal
			County, State of	HENDBICKS
County. Dated this day of day of	1281	of the Circuit of the Circ	cuit Court of	HEINDRICKS
	, 19.			
Filed and recorded in accordance with the laws		Signed Dennis	vetly + v	. Sometimes and the second
Filed and recorded in accordance with the laws of the State of	f Indiana this	20	oter	×1
Part Colors Children		Signal May of		, 19

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	175
	THE REAL PROPERTY.

HENDRI	CKS File
MALE Medical Examination Report Dated 4/28-8/	7-/-8/
	FEMALE Date of Application
Name of Physician Aura Magary	Medical Examination Report Dated 4-28-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-1/prescribed "False states	Name of Physician Away Managed
shall be fined in any sum not exceeding five nundred dollars (\$500,00)".	Name of Physician Aura Haggard hoever procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle	
Statt fremen Last	Name FEMALE APPLICANT
Date of Birth Month Day Cear	Date of Birth Julia amanda /1/2 Last
Place of Birth (State or foreign country)	Day Wase
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)
14 Dex 184 Clayton State	Residence Address
Previous Marital Status: Never Married OR	State Handing State
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Appellant
Other(Specify)	Date of birth verified by: Birth Certificate Judicial Decree
	Other(Specify)
No Yes L	1. Are you now or have you ever been adjudged to be a
If answer is 'yes , has the adjudication been removed? No Yes	If answer is "yes", has the adjudication be-
3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor?
6: List the full names of any dependent children.	3. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	No □ Yes □
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Thankfull Jose	8. Full name of father AMUS
Residence of father (if deceased so state) flauxfully fn.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	N 1
9. Full maiden name of mother Marilem Randalph,	Birthplace of father (State or foreign country)
Project of mathewall de la contraction of the land of	9. Full maiden name of mother Juanuta K. Il Consuyor
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Thumpself, h.
Birthplace of mother (State or foreign country) State of Indiana.	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.	State of Indiana,
CNI	County of in this application is true and correct.
Signed SCOU LOUT	Signed Lydia a Ware
New Address Rt. 1 Box, 184 Claytor	New Address Rt. 1 Box 184 Clayton
Subscribed and sworn to before me this day of // aux 19/1.	Subscribed and sworn to before me this day of May 198/
Clerk HENDRICKS Circuit Court	Il and pre Truscell Gerk HENDRICKS Girguit Court
A description of the court	Clerk 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS ss:
County of HENDRICKS ss:	County of HENDRICKS
Signed	SignedFather
	Signed
	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this
Clerk	Clerk
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license having been refused to the above named parties, the
HENDRICKS LICENSE ISSUED BY ORDER OF COURT	rt by written order issued and filed
Countyauthorizes and directs the issuance of	a marriage license to the above named parties.
authorizes and directs the issuance of	
Be It Remembered, there was filed in my office a marriage license	
Indiana dated the day of and et it further remembered, the following marriage certificate was filed in my office.	1981 authorizing the joining together as husband and wife
aurea the day of	, Lydia Amarda Dare
e it further remembered, the following marriage certificate was filed in my offi	ice, to-wit.
Raph P. Wade he	reby certify that on the day of the day of
e thousand nine hundred and 8 at	Friends wood, country of the
ate of Indiana, Groom Scott J. Love of	Marion County, State of Tod
d, Bride ydia A. Dare of	erallicks County, State of HENDRICKS
. o Ul me au 1	at purpose by the Claim of
unty.	a L. P. Londo
ated this day of Day, 1981	Signed Rajor P. Wade Ficial Designation Pastor
0.6	
led and recorded in accordance with the laws of the State of Indiana this	igned Many Janes HENDRICKS Circuit Court
of the State of Indiana this	igned Many Janes HENDRICKS Circuit Court
5	C 2

Form Prescribed By Indiana State Board of

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

... Circuit Court

Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977 HENDRIC	County Date of Application
	FEMALE Singuish Report Dated 4-28-81
MALE Medical Examination Report Dated 4 - 28 - 8	Medical Examination Report Dated
medical Examination	Name of Physician W. R. Harris
Name of Physician Who would be a statement - Who	oever procures the issuance of a license to marry by any false statement, representation or prete
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name First Middle Vaccore	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	5470 Pleasant H M apt & Sudpl.
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Divorce Hadriage Process
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) D. S. W prot	Other (Specify) D. & W/ Sect.
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No 💆 Yes
If answer is "yes", has the adjudication been removed? No P Yes No Yes	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes
Z. Are you attricted with a transmissible disease.	3. Are you related to the male applicant closer than second cousin? No. Yes
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No ☼ Yes □	4. Are you now under the influence of intoxicating liquor? No Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above dependent children? No □ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
8. Full name of father weekly forms) access	compliance with any court order or orders issued for their support. 8. Full name of father Souls R. Browner
Residence of father (if deceased so state) Hibbing M montal	00000
Da: Ma	Residence of father (if deceased so state)
9. Full maiden name of mother South Stone Ond Stone	Birthplace of father (State or foreign country)
	9. Full maiden name of mother Description C. Caultan
A .	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Male of State of Indiana,	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.	State of Indiana, County of HENDRICKS Sa: I depose and state the information gives in this application is true and corrections.
Signed Janan	Mailya Broman
New Address 1623 BEECH CIR. PLAINFIELD, IN.	New Address 1623 Beech Circle Place
Subscribed and sworn to before me this day of May	
Many Jana Rusell Glerk HENDRICKS Circuit Court	
	Many Jano Russell Clerk HENDRICKS Circuit Cou
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one parents
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, County of HENDRICKS ss:	State of Indiana,
,	County of HENDRICKS ss:
Father	Signed Fathe
Signed Mother	Signed Mother
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	
HENDRICKS County Co	T. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	f a marriage ligones to the
D. Formy v. Fr.	and the above named parties
Be It Remembered, there was filed in my office a marriage licen. day of Indiana dated the day of Alan	se issued by the clerk of the
Donald Lee Ugacari	se issued by the clerk of the HENDRICKS Circuit Cour , 19
one thousand nine hundred and 8	ffice, to-wit: hereby certify that on the day of hand
State of Indiana, Groom Donald 1	at Africa day of day of
and, Bride Marlys Dee Book	of there , County of Hand
vere by me united in marriage as authorized by a marriage !	that purpose by the Clerk of the Circuit County of HENDRICKS
County. Dated this day of 19	that purpose by the Clerk of the Circuit County, State of HENDRICKS
Dated this day of y, 1981	or circuit Court of
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Catholic Priest
this	day

.Clerk

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Date of Application Medical Examination Report Dated 4-28-81 FEMALE Medical Examination Report Dated 4-28-81 Name of Physician_ Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense MALE APPLICANT FEMALE APPLICANT Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify) Nouve Lee 1. Are you now or have you ever been adjudged to be of unsound mind? 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? No W Yes No T Yes If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? No Yes No B Yes 2. Are you afflicted with a transmissible disease? Are you related to the female applicant closer than second cousin? No Yes No Yes D 3. Are you related to the male applicant closer than second cousin? No Yes now under the influence of intoxicating liquor? No WYes 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes D No Yes D 5. Are you now under the influence of a narcotic drug? No Yes 6 List the full names of any dependent children. 6. List the full names of any dependent children Donne M. Powers 11 Pours Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No Yes D No T Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support. 8. Full name of father Council Holest Houses 8. Full name of father From Residence of father (if deceased so state) second Birthplace of father (State or foreign country)_ Residence of mother (if deceased so state) declared Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana. I depose and state the information given in this application is true and correct. HENDRICKS New Address 0 733 N 1000 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana. State of Indiana, HENDRICKS HENDRICKS County of ... Father Signed. Signed Signed. Signed COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued 3 day Waller HENDRICKS 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. I, authorizing the joining together as husband and wife of Indiana dated the... Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the. one thousand nine hundred and 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

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

County. Dated this.

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APPLICATION

TION	FOR	MA	RRIA	GE	LICENSE
	HENDRIC	CKS		Coun	ty

File_	
	5-1-81

Form Prescribed By	ICATION FOR M	ARRIAGE LICENSE	File
Health under Authority	HENDRICKS	County	Date of Application
of I.C. 31-1-3-2 Effective July 1, 1977	Ro	marriage	- Art of Application
	- He	FEMALE Medical Examination Repo	ort Dated 4-21-81
MALE Parent Pated	21-81	Was I	ald. 6. TU halen
Medical Examination Report 2	/1	Name of Physician	and the same
Name of Physician Strald & Manager All QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 pressured as a second of the seco	Whoev	er procures the issuance of a license to t	marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prese	ribed "False statement" 500,000".	FEM	IALE APPLICANT
shall be fined in any sum not exceeding five hundred dollars (8) MALE APPLICANT		Firet	Middle Last
Name First Middle	Mast wo	Name Inances	Marie Martinson
Joren Throla	Year -	Date of Birth Month	25 1921
Date of Birth Month Day	1920 -	Place of Birth (State or foreign count	ry) un a hair
Place of Birth (State or foreign country)	1011:	Residence Address Street or	R. R. City County State
Residence Address Street or R. R. Oity	County State	13714 1. Dag	draw st. Theking
3142 I lushing Ra. Fline 9	1) scruger	Previous Marital Status: Never Married	□ OR
Previous Marital Status: Never Married OR		Last Marriage Ended By Death Div	orce Annulment
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by. Birth Certi	ficate U Judicial Decree
Date of birth verified by: Dertificate Dudicial Decree			
Other (Specify) Mours Linense		Other (Specify) Nauvel	S O SCENE
Are you now or have you ever been adjudged to be of unsound mind?	No Ves 🗆	1. Are you now or have you ever been adj	udged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed?	No Yes -	If answer is "yes", has the adjudication	
2. Are you afflicted with a transmissible disease?	No □ Yes □	2. Are you afflicted with a transmissible	
3. Are you related to the female applicant closer than second cousin?	No Yes O	Are you related to the male applicant of Are you now under the influence of interest.	
4. Are you now under the influence of intoxicating liquor?	No Yes	 Are you now under the influence of a n Are you now under the influence of a n 	
5. Are you now under the influence of a narcotic drug?	No Yes O	Are you now under the influence of a fig. List the full names of any dependent of	
6. List the full names of any dependent children.		6. List the full names of any seperation	
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or	orders to support the above
dependent children?	No □ Yes □	dependent children?	No Li Yes Li
If answer is "yes", it is required that this Application be accompanied by	satisfactory proof that you are in		is Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	2 622)	compliance with any court order or ope	tmas Flen
8. Full name of father And Artimes		S. Full liam of factor	d. ,
Residence of father (if deceased so state) Ulclased		Residence of father (if deceased so state).	accessed
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign cou	intry Michigan
9. Full maiden name of mother Mabel Sa	lverson	9. Full maiden name of mother	Maude Phillips
deman	d.		decensed
(100	~	Residence of mother (if deceased so state	m. 1.
Birthplace of mother (State or foreign country)	0	Birthplace of mother (State or foreign co	untry Michigan
State of Indiana, County of HENDRICKS State of Indiana, I depose and in this applie	state the information given cation is true and correct.	State of Indiana, HENDRICKS	as: I depose and state the information gives in this application is true and correct
County of		county of	
Signed Loven H. marl	usen PROTOS	Signed	nances marluson
New Address 8060 DEVILS ELI	BOW DRI MICH.	New Address 12	114 Jr. Sayriaw St. M.
Subscribed and sworn to before me thisday of	may , 1981	Subscribed and sworn to before me th	
Mary Jane Kusselderk HER	NDRICKS Circuit Court	1	O LIE IDDICKE
	Circuit Court	the flerity fames 1)	LL DORLORS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT	OR CHARRIAN
We, the parents, of this applicant hereby give consent for this m	arriage. If only one parent		
signs, state facts which render the consent of the other parent u			ereby give consent for this marriage. If only one paren
barent of the other parent t	innecessary	signs, state facts which render the c	consent of the other parent unnecessary
			77.00
State of Indiana,			
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS) ss:
Signed.		County of MENDRICKS	
		Signed	Fathe
Signed	Mother Mother	Signed	Mothe
Subscribed and sworn to before me this	, 19	Subscribed and sworn to before me the	
	Clerk	to before me u	day of Cler
COMPLETE IF MADDIAGE LICENSES		20/4/2011/2011	A STATE OF THE PARTY OF THE PAR
COMPLETE IF MARRIAGE LICENSE ISSUED HENDRICKS County	BY ORDER OF COURT	C. A marriage license having b	een refused to the shows named parties, the
authorizes	issuante ()	a marriage license to the show	1
RETURN (F MARRIAGE LICENSE	AND MARRIAGE CERTIFIC	named parties.
Be It Remembered, there was filed in of Indiana dated the day of	my office a marriage licens	se issued by the clark of the	HENDRICKS Circuit Cour
		1000	
Be it further remembered, the following marriage cert,	nti6l	nd Dan authorizi	ing the joining together as husband and wif
1, Rev Time of al	rupcate was filed in my of	fice, to-wit:	11/astrison
31	ZIVICCIO.	ereby contist of	W.
and, Bride Standard M. M.	mundon)	toward. I	, County of Miles
and, Bride were by me united in marriage as authorized by a mo County. Dated this day of	of	Ganagea	County, State of Michigan
County.	arriage license issued for t	hat purpose by the Cl	County, State of
Dated this day of	Con.	of the Clerk of the (Circuit Court of HENDRICKS

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

Signed Official Designation....

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	159	
File	Section 1	

MALE	
Medical Examination Report Dated 1-29-81	FEMALE Date of Application
Name of Physician Jack Dun- Pan-	Medical Examination Report Dated 21-81
OUESTIONS MUST BE ANSWERED IC STATES	Name of Physician
ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	pever procures the issuance of a limit
MALE APPLICANT	a neense to marry by any false statement, representation or pretense
Name Harry Medical Fa Last	Name FEMALE APPLICANT
Date of Birth Month Day Year grant	Date of Birth Mostle June 7/11 Last
Place of Birth (State or foreign country)	Day God Co
Residence/Address Street or R. B. City County State 864	Place of Birth (State or foreign country)
1943 Hangelon Clive. Aurenauly N. O.	Residence Address Street or R. R. City County State
Previous Marital Status. Never Married COR	State Drausisters - No
Last Marriage Ended By Death Divorce Annulment Date of birth verified by Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR Last Marriage Ended Pur Death OF
Date of Dirth Vertical of	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Other(Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	Other (Specify)
If answer is "yes" has the adjudication been removed? No Yes C Are you afflicted with a transmissible disease?	1. Are you now or have you ever been adjudged to be of unsound mind? No 2 Yes 1 If answer is "yes", has the adjudication been removed? No 2 Yes 2
No W Yes	2. Are you afflicted with a transmissible diagram
As you now under the influence of intersecting liques?	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes O No Yes O	4. Are you now under the influence of intoxicating liquor?
5. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
20 00 00 00 00 00 00 00 00 00 00 00 00 0	
Are you required by any court order or orders to support the above	
dependent children" No 🗆 Yes 🗆	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court orders issued for their support.	No ☐ Yes ☐ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Full name of father Mount for the Thangman	compliance with any court order or orders issued for their support.
At the way the	8. Full name of father Sidney J. Walty
1) Jacobs to .	Residence of father (if deceased so state) & Asureshura, In
Birthplace of father (State or foreign country	Birthplace of father (State or foreign country)
Full maiden name of mother Alburing R. Stair	9. Full maiden name of mother Juneda Jaw Williams
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Sullisar, Su
Birthplace of mother i State or foreign country bid	Birthplace of mother (State or foreign country)
ate of Indiana. I depose and state the information given in this application is true and correct.	State of Indiana
Il C	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed DAVED M. FRANKLUAN	Signed Steen Waltz
New Address 1943 PRINCE TON AUE CAN RENCEVILLE	New Address 1943 Princetonal Laure
bscribed and sworn to before me this day of 19	Subscribed and sworn to before me this
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS Circuit Court
NSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
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
is, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
e of Indiana.	State of Indiana,
nty of HENDRICKS se:	State of Indiana, HENDRICKS County of
Signed Father	Signed Father
	Signed Mother
The state of the s	Subscribed and sworn to before me thisday of, 19
cribed and sworn to before me this day of	Subscribed and sworn to before me this
Clerk	
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	A marriage license having been refused to the above named parties, the
HENDRICKS County Court	t by written order issuedand med
authorizes and directs the issuance of a	a marriage license to the above named parties.
DESCRIPTION OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
We It Remembered, there was filed in my office a marriage license	
ndiana dated the 11th day of May	g, 1902, authorizing the joining
and a second of the second of	se to wit:
further remembered, the following marriage certificate was filed in my offic	rehy certify that on the
thousand nine by I is at	0) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
thousand nine hundred and at according to a second of Indiana, Groom and the second of	County, State of 1 Land
Roids	A DOS
by me with the	t purpose by the Clerk of the Circuit Court of
d this day of May, 1981.	Signed Sommer Life
Offi	icial Designation , 19
and recorded in accordance with the laws of the State of Indiana this	day of Clerk
in accordance with the laws of the State of Induna Si	gned HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

180 5-1-81 Date of Application

.... Circuit Court

Form Prescribed By Indiana State Board of APPLICATI	ON FOR MA	ARRIAGE LICENSE	File 5
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of Application
		FEMALE Medical Examination Report Date	ed 4-21-81
MALE Medical Examination Report Dated 4-37-8/		Name of Physician	
		Name of Physician	cany false statement, representation or tree.
Name of Physician arry N. Jovall ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "Fals ALL QUESTIONS MUST BE ANSWERED by the state of the	se statement-Whoever	procures the issuance of a needs	A DOLLO A NEW
shall be fined in any sum not exceeding fire			Middle
Name First Middle	Last	Name First	Sem 14 on
Bost Was	r	Date of Birth Month	Day Year Year Sq
Date of Birth	9	Place of Birth (State or foreign country)	inois)
Place of Birth (State or foreign country)	State	Residence Address Street or R. R.	City County State
Residence Address Street of R. R. City County	- etter	RR a Box 134	The same of the sa
Previous Marital Status: Never Married OR		Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce	Annulment D
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by: Birth Certificate	Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree			
Other (Specify)		Other (Specify) 1. Are you now or have you ever been adjudged to	be of unsound mind? No Ye
1. Are you now or have you ever been adjudged to be of unsound mind?	No □ Yes □	Are you now or have you ever been adjudged. If answer is "yes", has the adjudication been rem	
If answer is "yes", has the adjudication been removed?		2 Are you afflicted with a transmissible disease.	No A Ye
2. Are you afflicted with a transmissible disease?3. Are you related to the female applicant closer than second cousin?		3. Are you related to the male applicant closer than	
Are you now under the influence of intoxicating liquor?	No ♥ Yes □	4. Are you now under the influence of intoxicating	
5. Are you now under the influence of a narcotic drug?	No A Yes	5. Are you now under the influence of a narcotic dr	rug? NoÀ Ye
6. List the full names of any dependent children.		6. List the full names of any dependent children.	
7. Are you required by any court order or orders to support the above dependent children?	No□ Yes□	 Are you required by any court order or orders to dependent children? 	o support the above No Tye
If answer is "yes", it is required that this Application be accompanied by satisfactory pr	roof that you are in	If answer is "yes", it is required that this Applica	tion be accompanied by satisfactory proof that you ar
compliance with any court order or orders issued for their support.		compliance with any court order or orders issued	d for their support.
8. Full name of father baston W. March		8. Full name of father W Wres	in Southern
Residence of father (if deceased so state) Scatos and la Min	d	Residence of father (if deceased so state)	Land aleenah
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Down.
9. Full maiden name of mother & Systeth a. Viato		9. Full maiden name of mother	The fill arrivall
Residence of mother (if deceased so state)	2.	Residence of mother (if deceased so state)	Same
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country)	Dove.
State of Indiana, HENDRICKS 88: I depose and state the in this application is tr		State of Indiana, HENDRICKS	ss: I depose and state the information gi
County of Harden is the County	-/	County of TILIVERICKS	
Signed Signed AM	uz	Signed X BUN	ierly yan simple
New Address 75t. W. L4t. Ind. 47	706	New Address	St. O. W. rafayette; an
Subscribed and sworn to before me thisday of	5 19 61	Subscribed and sworn to before me this	day of 19
Many Jane Russell Clerk HENDRICKS	Circuit Court	Mary Jana Russel	Clerk HENDRICKS Circuit Co
CONSENT OF PARENTS, PARENT OR GUARDIAN			
We, the parents, of this applicant hereby give consent for this marriage. If		CONSENT OF PARENTS, PARENT OR GU	
signs, state facts which render the consent of the other parent unnecessary		We, the parents, of this applicant hereby giv	
and the parent differences ary.	***************************************	signs, state facts which render the consent of	f the other parent unnecessary
	4,300		***************************************
Charles of Tables			***************************************
State of Indiana, County of HENDRICKS ss:		State of Indiana,	
Signed		County of HENDRICKS	***
Signed		Signed	Fat
Subscribed and sworn to before me this	Mother	Signed	Mo
Subscribed and sworn to before me this	19	Subscribed and sworn to before me this	day of 19.
	Clerk		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORD HENDRICKS County	ER OF COURT	A mornia V	
HENDRICKS County	Cour	A marriage license having been ref	fused to the above named parties, and fi
authorizes and direct	ts the issuance of	a marriage license to the show and	and u
RETURN OF MARR	IAGE LICENSE	AND MARRIAGE CERTIFICATE	parties.
of Indiana dated the	-30 techse	issued by the clerk of the	HENDRICKS Circuit Co
of Indiana dated the day of day of Be it further remembered, the following marriage certifications	Lug	, 198 , authorizing the	joining together as husband and u
Be it further remembered, the following marriage certificate w	as filed in my off	ce to wit:	Sempla
one thousand nine hundred and State of Indiana, Groom.	he	reby certify that	
one thousand nine hundred and State of Indiana, Groom South Superior and, Bride Superior Supe	at	Down In	day of May
and Bride Samely S	of	Putro	, County of
were by me united in marriage as authorized by	of	Had	ounty, State of
were by me united in marriage as authorized by a marriage lic County. Dated this	ense issued for the	at purpose by the Clerk of the Circuit	Court of HENDRICKS
Dated this day of Marriage the			
		Signal	mer le
Filed and recorded in accordance with the laws of the State of	Indiana this	ficial Designation day of	ta
Designation of Experience	this	day of M	1981

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No	181	
File	42	F MONEY

.Circuit Court

MALE	5-1-81
Medical Examination Report Dated 4-25-81	FEMALE Date of Application
Name of Physician K. R. Wormley	Medical Examination Report Dated 4-25-81
OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 proceedings and	Name of Physician Houveley Roever 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)".	noever procures the issuance of a license to many
	and the to marry by any false statement, representation or pretense
Name First Middle Last	Name Final APPLICANT
Date of Birth Month Day Year	A First Middle Signat
Place of Birth (State or foreign country)	Date of Birth Month Day Year
and the same of th	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	D-11
Previous Marital Status Never Married OR	Residence Address Street or R. R. City County State
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
1 Other (Specify) D. & w/ pick	
1. Are you now or have you ever been adjudged to be of unsound mind? No D Yes	A Other (Specify) D. L. wheat
If answer is "yes", has the adjudication been removed? No□ Yes□	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "you" has the state of the stat
2. Are you afflicted with a transmissible disease? No A Yes O	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No A Yes D	3 Are you related to at
4. Are you now under the influence of intoxicating liquor? No Pa Yes D 5. Are you now under the influence of a narcotic drug?	4 Are you now under at the
Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes N
	6. List the full names of any dependent children.
Jeff fores	Elizabeth,
	James
	CA.
7. Are you required by any court order or orders to support the above	States
dependent children" No 🗆 Yes 🗆	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father Carl Ferrary House	compliance with any court order or orders issued for their support.
C. I will marrie of instruct	8. Full name of father John D. Ditabley
Residence of father (if deceased so state)	Residence of father (if deceased so state) Indoles . Id.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Mildred J. Bangott	1 m e
Residence of mother if decreased so states Andrews	9. Full maiden name of mother Age and I Walryou
	Residence of mother (if deceased so state) And Ala, Ald
Birthplace of mother i State or foreign country	Birthplace of mother (State or foreign country)
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
col . all	County of The County of The County of County of The County of Coun
Signed Cany Suus	Signed Allewing T. Welley
New Address 306 Walrack	New Address 306 Walios 1
Subscribed and sworn to before me this day of	Subscribed and sworn to before me this day of 1951.
11 som Jane Russel Gerk HENDRICKS Circuit Court	Man Jane Russon Clerk HENDRICKS Circuit Court
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 parent	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.	signs, state facts which render the consent of the other parent unnecessary
the consent of the other parent unnecessary	organical states of the state o
tate of Indiana,	State of Indiana, HENDRICKS } ss:
ounty of HENDRICKS ss:	County of
Signed	SignedFather
	Signed
Signed Mother	Subscribed and sworn to before me thisday of
bscribed and sworn to before me this day of	Subscribed and sworn to before me this.
Clerk	Clerk
OMP	is a license having been refused to the above named parties, the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	and filed urt by written order issued
County	urt by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen	se issued by the common together as husband and wife
Indiana dated the day of	2 Ditchen
	00
Stephen C. (2020)	fice, to-wit: nereby certify that on the 16 day of May rence, County of Lawrence,
e thousand nine b	nereby certify that on the day of County of Lawrence, at Bedford County, State of Find
ate of Indiana Control and	County, State of Ind
ate of Indiana, Groom Harry S. Goens d, Bride Lillian E Ditchey of	Macion County, State of HENDRICKS
Te by me	
unty united in marriage as authorized by a marriage license issued for the	
sted this day of May , 1981	Signed Stephen C. Goens
day of	Official Designation Pasto 1981
led and recorded in accordance with the laws of the State of Indiana this	19 day of Clerk
and recorded in accordance with the laws of the State of Indiana this	Signed Many Curry HENDRICKS Circuit Court
	Signed Circuit Court

APPLICATION FOR MARRIAGE LICENSE

182

... Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of ADDI ICATION FOR	MARRIAGE LICENSE	File
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977 HENDRI		May 4/1981 Bate of Application
MALE Medical Examination Report Dated 4-28-81	FEMALE Medical Examination Report Name of Physician C. C.	t Dated_4-28-81
S (land	Name of Physician	arry by any false statement, representation or
ALL OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement-W	hoever procures the issuance of a license to it	arry by any this section or
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT		ALE APPLICANT Middle
Name First Middle Dollan	Name First	S. Kinde
Date of Birth Month Day Year	Date of Birth Month	Day Year 1964
Place of Bigth (State or foreign country)	Place of Birth (State or foreign country	, Ludiana
Residence Address, Street or R. B. City County State	Residence Address Street of R	It Plantill St
RR# 6 Bod 190 Brownsleurg, Jadiona	Previous Marital Status: Never Married	OR OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divor	ce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certific	
Day of the Market ID (w) Dia	Other (Specify) Birth C	ent
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	Are you now or have you ever been adjud	
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication be	
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible dis	
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No □ Yes □	Are you related to the male applicant clos Are you now under the influence of intox	
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a nar	
6. List the full names of any dependent children.	6. List the full names of any dependent child	ren.
7. Are you required by any court order or orders to support the above		dans to suppose the share
dependent children?	7. Are you required by any court order or or dependent children?	ders to support the above N_0
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.		pplication be accompanied by satisfactory proof that y
8. Full name of father Tational Jee Oldhom	8. Full name of father Page	issued for their support.
Residence of father (if deceased so state) Brownshur, In	Residence of father (if deceased so state)	00. 1000 10
Birthplace of father (State or foreign country) Indiana	Birthplace of father (State or foreign countr	1 1
9. Full maiden name of mother_El_Paulene Holt	9. Full maiden name of mother Ela M	
Residence of mother (if deceased so state) Brownsleurs, In		0 9-1.001
Birthplace of mother (State or foreign country) Inclina	Residence of mother (if deceased so state)	11 0.
State of Indiana,	Birthplace of mother (State or foreign count State of Indiana,	
	County of HENDRICKS	ss: I depose and state the information in this application is true and o
Signed Thomas & Ollham	Signed Fo	en Kindley
New Address PR 6 Box 190 BROWN & Borg		6 BOX 190 Brown
Subscribed and sworn to before me this day of May 1981.		4 day of May
May Jone Russell Clerk HENDRICKS Circuit Court		Clerk HENDRICKS Circuit
CONSENT OF PARENTS, PARENT OR GUARDIAN	- 0 2	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	CONSENT OF PARENTS, PARENT OF	
signs, state facts which render the consent of the other parent unnecessary	II .	give consent for this marriage. If only one
	signs, state facts which render the cons	ent of the other parent unnecessary
	J	
State of Indiana, County of HENDRICKS } ss:		
County of TILINDRICKS	State of Indiana, County of HENDRICKS	} ss:
Signed Father	0 1	0 % 10
Signed	0.,	sh Kindley
Subscribed and sworn to before me thisday of19	Subscribed N	A Trusley »
Clerk	Subscribed and sworn to before me this	day of
COMPLETE IF MARRIAGE LICENSE ISSUED BY OR		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County authorizes and directs the issuance of	RT. A marriage license having been purt by written order issued 3	refused to the above named parties,
Droman	marriage license to the above nor	and most:
of Indiana dated the	E AND MARRIAGE CERTIFICATI	
Be it further remembered, the following marriage certificate was filed in my o		HENDRICKS Circuit C
Be it further remembered, the following marriage certificate was filed in my o	and Kasen authorizing	he joining together as husband and
I was a second of the second o	vice, to-wit:	Les Contractions of the Contraction of the Contract
State of Indiana County	at he is the	day of
and, Bride Caron S	of Hand	, County of
one thousand nine kundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for County. Outed this day of 19	Handrick .	County, State of Indiana
toolea jor	that purpose by the Clerk of the	County, State of Ludiana
Dated this day of 198	Of the Circu	it Court of HENDRICKS

Official Designation

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

Form Prescribed By Indiana State Board of Health under Authorits of IC 31-1-3-2 Effective July 1 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	183
File	42
Me	ey 4, 1981

... Circuit Court

MALE Medical Examination Report Dated	FEMALE Date of Application
Name of Physician	Medical Examination Report Dated
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Wh	Name of Physician
MALE APPLICANT	bever procures the issuance of a license to marry by any false statement, representation or protoned
Name Fight Middle O 1- Last	FEMALE APPLICANT
Date of Birth Month Day Chechiaciso, Y	Middle
Place of Birth State or foreign country)	Date of Birth Mogtin Ci. Class
M. Jenon New York	Place of Birth (State of foreign country) Year 15 1950
Residence Address Street or B. R. Mily County State	Residence Add Bluff //a
Previous Marital Status: Never Married OR	RK Stiles County State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Appulment D
a mount Princes Lie ulli	Date of birth verified by: Birth Certificate Judicial Decree
O Other (Special)	
Are you now or have you ever been adjudged to be of unsound mind? No VYes D	and willer
If answer is "yes" has the adjudication been removed? No Ves C Are you afflicted with a transmissible disease?	1. Are you now or have you ever been adjudged to be of unsound mind? No. Yes C If answer is "yes", has the adjudication been removed? No. Ves C
Are you related to the female applicant closer than second equiper	2. Are you afflicted with a transmissible disease? No Yes
Are you now under the influence of intoxicating liquor? No Wyes	3. Are you related to the male applicant closer than second cousin?
Are you now under the influence of a narcotic drug? No D Yes D	4. Are you now under the influence of intoxicating liquor?
List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
	Blod Clay 4
Are you required by any court order or orders to support the above	
dependent children" No□ Yes□	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	No ☐ Yes ☐ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. Full name of father with the court of their support.	compliance with any court order or orders issued for their support,
m+1/2 + Oil	8. Full name of father Otis Ondrew Stinson
Residence of father (if decreased to state) /// U-emou, 11. 9.	Residence of father (if deceased so state) cleceose
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Va.
Full maiden name of mother Slodys Belmonte	9. Full maiden name of mother Leatha Mortha White
Residence of mother (if decreased so state)	Residence of mother (if deceased so state) Stileswillo
Birthplace of mother (State or foreign country) 22. H.	
ate of Indiana. HENDRICKS as: I depose and state the information given	State of Indiana.
New Address + 5 flamena 19+6 (Inches of 195) New Address + 5 flamena 19+6 (Inches of 195) New Address + 5 flamena 19+6 (Inches of 195) New York Russell Cark HENDRICKS Circuit Court	Signed My Med (last New Address 455 Framana (mortility Current), 1981. New Address 455 Framana (mortility Current), 1981. Now You Russell Clerk HENDRICKS Circuit Court
NSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
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
s. state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
e of Indiana, http of HENDRICKS } as:	State of Indiana, HENDRICKS } ss:
tty of HENDRICKS \$ 485	County of
Signed Father	Signed Father
Signed Mother	Signed
tribed and sworn to before me this day of	Subscribed and sworn to before me this
Clerk	Clerk
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS	T. A marriage license having been refused to the above named parties, the art by written order issued. Balage Warm and filed a marriage license to the above named parties.
AND MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
Indiana dated the day of an an	, 1981, authorizing the joining together as husband and wife
thousand	County of County of
thousand nine hundred and S	Montoney County, State of
of Indiana, Groom Com Quelianico (1.0)	County, State of HENDRICKS
by me united in marriage as authorized by a marriage license issued for th	at purpose by the Clerk of the Circuit Court of HENDRICKS
by me united in marriage as authorized by a marriage license issued for the	
d this day of May 1951	Signed Soul Marrer
	14.4.0
and	day of Clerk
d and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court

Le-Marriage

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority

HENDRICKS County

of I.C. 31-1-3-2 Effective July 1, 1977	application Company
1 27 4	FEMALE Medical Examination Report Dated 4-87-8/
MALE Medical Examination Report Dated 4-27-81	Name of Physician Sung Cohen
Name of Physician Siring Cohen	the assumes of a license to marry by any false statement, representation or use
Name of Physician Suring Cohen ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoele ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoele Questions and exceeding five hundred dollars (8500.00)".	ver procures the issuance and include the
shall be fined in any sum not exceeding	FEMALE APPLICANT
MALE APPLICANT	Name Lebrah a landredate
Name Michael R. Day Year	Date of Birth
Date of Birth Month 7	Place of Birth (Spite or foreign country)
Place of Birth (State of foreign country)	Residence Address Street of R. R. Aty Sounty Stap
Residence Address gard Gard Dr. Plad New Jones.	424 Gary M. The Sto
Previous Marital Status: Never Married OR	Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment O
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	11
Other (Specify) Driver Lecense apicture	Other (Specify) Drues Second ypicture
No 2 1es	1 Are you now or have you ever been adjudged to be of unsound mind? No Yes D No D Yes D
If a very is "year" has the adjudication been removed?	If answer is "yes", has the adjudication been removed" No Ves O Are you afflicted with a transmissible disease" No Wes O
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin. No Yes D
3. Are you related to the female applicant closer than second cousin:	4. Are you now under the influence of intoxicating liquor* No DYED
4. Are you now under the influence of intoxicating liquor.	5. Are you now under the influence of a narcotic drug" No WYes D
Are you now under the influence of a narcotic drug? List the full names of any dependent children.	6 List the full names of any dependent children.
Same ->	Sucole Michelle Cantivolate
	7. Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children?	dependent children" No 2 Yes 0
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	8. Full name of father Court order or orders assued for their support
8. Full name of father Touchard Addy Surveys and Addy	Alain Sield a hard
Residence of father (if deceased so state)	Residence of father (if deceased so state).
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Kalli Clen Con Brock	9 Full maiden name of mother UNA Stanton Jain
Residence of mother (if deceased so state) Case by , Sud	Residence of mother is deceased so states Blacefield July
Birthplace of mother (State or foreign country) Sayton, Shio	Birthplace of mother (State or foreign country) Bultimore Maryland
State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana,
County of HENDRICKS in this application is true and correct.	County of HENDRICKS in this application is true and correct.
Signed Lluch ary lag lasolale	Signed X Deligrate a Vandrison
Signed Linch and Maddele New Address 924 809 81.	New Address 924 Jany DN
0 - 1 0/2 //.	New Address 924 Jacy And Subscribed and sworn to before me this 5 day of May 1981
New Address 24 My M. Subscribed and sworn to before me this 5 day of May 1. HENDRICKS	Subscribed and sworn to before me this 5 day of May 1981
New Address 224 My M. Subscribed and sworn to before me this. 5 day of 794 181.	5-1 1/611 8
New Address 24 My M. Subscribed and sworn to before me this 5 day of May 1. HENDRICKS	Subscribed and sworn to before me this 5 day of May 1981
New Address 224 My M. Subscribed and sworn to before me this. 5 day of May 18. Any and Cusself Clerk HENDRICKS Circuit Court	Subscribed and sworn to before me this 5 day of May 1981. Mary Jose Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 5 day of May 18. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	Subscribed and sworn to before me this 5 day of May 1981. Mary Ole Counter 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
New Address 224 244 Subscribed and sworn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 5 day of May 1981. Mary Jose Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 224 244 Subscribed and sworn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 5 day of May 1981. Mary Ole Counter HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this day of Pay 18. Subscribed and sworn to before me this day of Pay 18. 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	Subscribed and sworn to before me this 5 day of May 1981. Mary Ole Counter 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
New Address 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Subscribed and sworn to before me this 5 day of May 1981. Mary Ole Counter HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this day of Pay 18. Subscribed and sworn to before me this day of Pay 18. 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	Subscribed and sworn to before me this
New Address 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Subscribed and sworn to before me this
New Address 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Subscribed and sworn to before me this
Subscribed and sworn to before me this day of Pay 18. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS } ss: Signed Father Signed Mother	Subscribed and sworn to before me this
New Address 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Subscribed and sworn to before me this
Subscribed and sworn to before me this day of Pay 18. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS } ss: Signed Father Signed Mother	Subscribed and sworn to before me this
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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS ss: Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED By ORDER of the court of	Subscribed and sworn to before me this. Clerk
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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS ss: Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	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 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 Clerk T. A marriage license having been refused to the above named parties, the
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New Address	Subscribed and sworn to before me this. Clerk
New Address. Subscribed and sworn to before me this. Clerk. Clerk. HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of. Signed. Signed. Subscribed and sworn to before me this. Signed. Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS in	Subscribed and sworn to before me this. Clerk
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Subscribed and sworn to before me this. 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS ss: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County	Subscribed and sworn to before me this
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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 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 COURT HENDRICKS County 19 authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE of Indiana dated the day of 19 Be it further remembered, the following marriage certificate was filed in my office a marriage licen and state of Indiana, Groom 19 In the substant of Indiana, Groom 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a marriage license in the country 19 State of Indiana marriage as authorized by a mar	Subscribed and sworn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 18 Of a marriage license having been refused to the above named parties, the part by written order issued and filed a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Is a issued by the oter of the HENDRICKS Circuit Court and filed and find the other county of the pointing together as husband and wife the county of the county state of the county of the county state of the co
New Address. 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } ss: Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE of Indiana dated the day of Mother was filed in my office a marriage licent day of Marriage licent da	Subscribed and sworn to before me thin Aday 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 Signed Signed Subscribed and sworn to before me this day of 12 Clerk T. A marriage license having been refused to the above named parties, the part by written order issued and filed a marriage license to the above named parties. E. AND MARRIAGE CERTIFICATE Use issued by the steek of the HENDRICKS Circuit Court Ind., authorizing the joining together as husband and wife and office, to-wit: thereby certify that on the day of County of County of County, State of County, State of County, State of HENDRICKS HENDRICKS
Subscribed and sworn to before me this Greek HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County County County County County County Gree a marriage license is filed in my office a marriage license of Indiana dated the day of County Coun	Subscribed and sworn to before me thin day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 18 Of a marriage license having been refused to the above named parties, the part by written order issued and filed a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Is a issued by the oter of the HENDRICKS Circuit Court and filed and filed in the other county of the pointing together as husband and wife the county of the county of County, State of County of County, State of County of County of County, State of County

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

	4
No	185
Tarr	

HENDRI	County
MALE Medical Examination Report Dated 5-1-81	Date of Application
0.0	Medical Francisco
	None Chi
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement, W	Name of Physician Michael R. Neely
MALE APPLICANT	Name of Physician Mechael R. Nealey hoever procures the issuance of a license to marry by any false statement, representation or pretense
Name Eight 1 Middle	
Martin D. Brage	Name C First
Date of Birth Month Day Year	Date of Birth Martin & Middle Schmitter
Place of Birth (State of foreign country)	Day Year
Residence Address Sreet or R. R. City County	Place of Birth (State or foreign country)
Scarge Ct. Indea Marion Incl	Residence Address Street or R. R. City County State
Previous Marital Status Never Married G OR	100 Dox 108 Danville Mand Ind
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of high weiffed to Date of high weight and the Date of high w
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
	Other(Specify)
If answer is "yes" has the adjudication been removed? No Yes No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Dies D	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Wes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes O	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children
	Cherie Ellow Inhanit
	Rein COO Coll
	Some wan schmitt, h.
7. Are you required by any court order or orders to support the above	Thanks end someth
dependent children' No V Yes 🗆	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	No Fyes U If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders usued for their support.	compliance with any court order or orders saued for their support.
o. Full name of father	8. Full name of father Carl Forter White
Residence of father (if deceased so state)	Residence of father (if deceased so state) Danul and.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Le ntuckel
9. Full maiden name of mother. Detty J. Nacholson	9. Full maiden name of mother Margaria Ellew Gladlen
Residence of mother (if decreased so state) Subspace Smil.	9. Full maiden name of mother 1. Compared Community of Co
A Triangle	Residence of mother (if deceased so state) Now !
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
That is B.	with the second
Sighed & fully tel	Signed Lufrice Schneett
New Address Scance Ct - LudiAVAgolis	New Address 5 Glorge Ce , Indian polis
Subscribed and sworp to before me this day of 1 11, 1981.	Subscribed and sworp to before me this. day of day of 19.1.
TI ary and Russellerk HENDRICKS Circuit Court	Thoughout Labell Clerk HENDRICKS 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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana. County of HENDRICKS } ss:	State of Indiana, County of HENDRICKS ss:
County of HENDRICKS 883	
Signed Father	SignedFather
Signed Mother	Signed
ubscribed and sworn to before me this day of	Subscribed and sworn to before me thisday of, 19
	Clerk
Clerk	
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS County	urt by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
THE PROPERTY OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licens	
Indiana dated the day of May	, 1901, authorizing
Mat. De a	of Yatrices & Solmit
e it further remembered, the following marriage certificate was filed in my of	ereby certify that on the day of County of County of
	cereby certify that on the County of County of
e thousand nine hundred and	County, State of State
ate of Indiana, Groom Natural Book	County, State of
d, Bride Patrice & Schmitt of	
ere by me united in marriage as authorized by a marriage license issued for the nunty.	hat purpose by the cities, and
ated this day of May 1981	resign 3 myses.
	W Miller
	Official Designation 1981
iled and recorded in accordance with the laws of the State of Indiana this	Ma Control Russell Clerk
	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

Form Prescribed By Indiana State Board of APPLICATION FOR M	IARRIAGE LICENSE
Health under Authority HENDRICK	S County Date of Application
of I.C. 31-1-3-2 Effective July 1, 1977	
	FEMALE Medical Examination Report Dated 5-5-8/
MALE 5-5-8/	1101110111
- Papart Hated	Name of Physician
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement - Whoe ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed Must Be ANSWERED. I.C. 31-1-3-6 prescribed Must Be ANSWERED. I.C. 31-1-3-6 prescribed Must Be ANSWERED. I.C	ver procures the issuance of a license to marry by any taise statement, representation or pretense
ALL OUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement"	FEMALE APPLICANT
	First Manue Last
MALE APPLICANT Middle	Name Sara and Tays
Name First Wayne Wayne	Date of Birth Month
Date of Birth Month	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address Street of R. R. County State
Residence Address / Street, or R. B. Gity & Hand les	1920 a tenver an Hanguer In.
A Shorland apt 18 thought of	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR	Manuara Ended By Death Divorce Annument
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Judicial Degree
Date of birth verified by: Birth Certificate Judicial Decree	Ha Liver
1 June 2	Other (Specify) No Ves D
Other (Specify)	1 Are you now or have you ever shad a
1. Are you now or have you ever been adjudged to be of unsound mind? No tes No te	If answer is yes that the second
If answer is "yes", has the adjudication been removed? No Mes 2. Are you afflicted with a transmissible disease?	2 Are you afflicted with a transmissible disease" No Tes C 3 Are you related to the male applicant closer than second cousin" No Tes C
No we see a second coursin?	3 Are you related to the male applicant closer than a decrease the same and the sam
No influence of intoxicating liquor?	4. Are you now under the influence of a narcotic drug? No Yes D
Are you now under the influence of a narcotic drug? No Yes	Are you now under the intruents of any dependent children.
6. List the full names of any dependent children.	6 List the 101 days of 101
	Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above No Yes dependent children?	dependent children"
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support
8. Full name of father Slorge + Wright	8 Full name of father Harry D. J. J. A. B.
Residence of father (if deceased so state) Audiplo. The	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)
Birthplace of father (State or foreign country)	Valle Dilla
9. Full maiden name of mother Maddage - Constant	9 Full maiden name of mother Subject to the subject
Residence of mother (if deceased so state) Haunfulla , fin-	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother i State or foreign country)
State of Indiana, I depose and state the information given	State of Indians. I depose and state the information given
County of HENDRICKS 88: in this application is true and correct.	County of
Signed Randolph Wayne Wright	Signed Jara Ann Hayer
New Address & / Shoreland apt 18	New Address Rt. 1 Shoreland Apt. 18
- What 9	Subscribed and sworn to before me this 5 day of May 181
Subscribed and sworn to before me this day of 198/.	
7/ auf pm Tusself Clerk HENDRICKS Circuit Court	lass par Tuself Olerk HENDRICKS Circuit Cour
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one parer
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	The state of the s
	The state of the s
State of Indiana,	State of Indiana,
County of HENDRICKS ss:	County of HENDRICKS
Signed	Fath
Signed	Signed
	Signed
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me this day of 19
Cletk	Cla
COMPLETE IF MARRIAGE LICENSE ASSESSED	
HENDRICKS County	JRT. A marriage license having been refused to the above named parties, t
	0 4 6
authorizes and directs the issuance	e of a marriage license to the above named parties.
RETURN OF MADDY AGE	
Be It Remembered, there was filed in my office a marriage lie	cense issued by the clerk of the HENDRICKS Circuit Con
De it further remembered, the following many	and
Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and	y office, to-wit:
	hereby certify that and the
and, Bride	Country State of Andrews
were by me united in marriage as authorized 1	though state of
were by me united in marriage as authorized by a marriage license issued for this day of the second	or that purpose by the Clerk of the Circuit Court of HENDRICKS
County. Dated this day of , 19	The Circuit Court of
, 19	Signed D. L. A. D. S.
	signed took to be gold
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

187 42 5-5-81

MALE Medical Examination Report Dated 5-4-81	FEMALE Date of Application
Name of Physician David M. Hadley	Medical Examination Report Dated 5-4-81
Name of Thysician	Name of Physician Round M. Hodla
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Wh	oever procures the image of the
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Wheshall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Il issuance of a license to marry by any false statement, representation or pretense
Name First Middle Lost	FEMALE ADDITIONS
Date of Birth Month Day Year	Part: Middle Last
Place of Birth (State-or foreign country)	Date of Birth Month Day
Indela Wid.	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State 10245. Set Pt. Rd. Dudple.	Residence Address
10001	Street or R. City County State
Previous Marital Status: Never Married OR Last Marriage Ended By Death Divorce Annulment Annulment	Previous Marital Status: Never Married A OR
Date of birth verified by: Birth Certificate Undicial Decree	Last Marriage Ended By: Death Divorce Annulment
Pate of on the section	Date of birth verified by: Birth Certificate Judicial Decree
Other(Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D	Other(Specify)
If answer is "yes", has the adjudication been removed? No No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
2. Are you afflicted with a transmissible disease? No X Yes C	If answer is "yes", has the adjudication been removed? No Yes C Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No 🖳 Yes 🗆	3. Are you related to the male and in the male
4. Are you now under the influence of intoxicating liquor? No X Yes D	4. Are you now under the influence
5. Are you now under the influence of a narcotic drug? No A Yes No Management of the control of the co	5. Are you now under the influence of a result is a
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
A COLOR OF THE COL	8. Full name of father Kenneth Cruschery
Residence of father (if deceased so state) Lud pla. Und	Residence of father (if deceased so state) Indula. Ind.
Birthplace of father (State or foreign country) Www.	Birthplace of father (State or foreign country)
Full maiden name of mother Quina & Lexte	100 110
Residence of mother (if deceased so state)	3. Tuli mandeli manie vi motner
residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of in this application is true and correct.
Signed & Tatuck Hels	Signed Sath Crusenberry
New Address 9918 W. Morris St, ExpPLS	New Address ag 18 w morkin St. Indols.
Subscribed and sworn to before me this 5 day of 5 1951.	Subscribed and sworn to before me thisday of, 1981.
Mar Ressold HENDRICKS	M D O HEVIDDICKS
Clerk Circuit Court	May for Restall Clerk MICHARICKS 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 parent
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.	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana, ounty of HENDRICKS	State of Indiana, HENDRICKS ss:
ounty of HENDRICKS	County of Father Suseakers Father
Signed	Signed
SignedMother	Signed Suna Succentience Mother
ubscribed and sworn to before me this day of 19	Subscribed and sworn to before me this day of 1981
	May Jaio Reseal Clerk
Clerk	100
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS CO.	art hy written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the HENDRICKS Circuit Court
Indian Indian	se issued by the clerk of the
101-1-101	nd Committee of the com
at further remembered, the following marriage certificate was filed in my of	fice, to-wit:
John C. Mar ren	perehu certitu that on the
e thousand nine hundred and S	at County of County of County of County State of County
ate of Indiana, Groom Latrick R. Hake	County, State of State of
d Direction of the contract of	County, State of LIENDRICKS
re by me united:	hat purpose by the Clerk of the Circuit Court of
unty.	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
ted this 9 day of May 1981	Signed Signed
	Official Designation
led and recorded in accordance with the laws of the State of Indiana this	I and Market 1
ed and	day 0) Clerk

Form Prescribed By Indiana State Board of Health under Authority of LC 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

	FEMALE Deted 4-27-8
MALE Medical Examination Report Dated Name of Physician A Dommell	Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician 2. O. Scammel
Name of Physician Lommell	of a license to marry by any false statement, representation or proton
The ANSWERED 1C 31-1-3-6 prescribed "False statement—Wh	pever 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 Last
Name First Middle TI 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Day Birth Month Day
Date of Birth Month Day	Date of Birth
gon (e 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 or R. R. City County	Residence Sunta & Lot 22 Round House acres, Inapled
37 Thatin Dr., Comment	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Leet Magriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Last Marriage Ended By: Death Last Mar	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
Other (Specify)	Other (Specify)
Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes□ No Yes□ No Yes□
If answer is "yes", has the adjudication been removed?	If allower to year the
2. Are you afflicted with a transmissible disease?	Z. Are you arrived
3. Are you related to the female applicant closer than second cousin?	0. 1114 944 955
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Yes □ No Yes □ No Yes □
5. Are you now under the influence of a narcotic drug?	Are you now under the initialities of a markets of a second of the full names of any dependent children.
6. List the full names of any dependent children.	6. List the full names of any dependent children
	7. Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Faul Right Le night	8. Full name of father Paymond Poyntu
Residence of father (if deceased so state) Onville Shoring	Residence of father (if deceased so state) Some set,
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Kentucky
	Chi to a 2 that
9. Full maiden name of mother 1 2 Control of the co	9. Full maiden name of mother than the first of the first
Residence of mother (if deceased so state) Samuelle Sadlang	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Kentucky
State of Indiana. County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, I depose and state the information given
County of TENDRICKS in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
Signed Stephen (), Wight	Signed X Sarah Pointer
New Address	New Address Rt. 8 Lot 22 Indplo. In
Subscribed and sworn to before me this	
May Dre Russell Glerk HENDRICKS Circuit Con	Subscribed and sworn to before me this day of A4 198
Clerk Circuit Court	Mary Jone Russell Gerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	00
	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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
State of Indiana, County of HENDRICKS } ss:	State of Indiana, HENDRICKS }ss:
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
County of HENDRICKS ss: Signed Father	HENDRICKS
County of HENDRICKS ss: Signed Father Signed Mother	County of HENDRICKS ss: Signed Father
County of HENDRICKS ss: Signed Father	County of HENDRICKS ss: Signed Father Signed Mother
County of HENDRICKS ss: Signed Father Signed Mother Subscribed and sworn to before me this day of , 19	County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19
County of HENDRICKS ss: Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk	County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed	County of HENDRICKS ss: Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed	County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County County authorizes and directs the issuance of authorizes and directs the issuance of the county co	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties, the court by written order issued and filed of a marriage license to the above named parties, the court by written order issued and filed of a marriage license to the above named parties, the court by written order issued and filed of a marriage license to the above named parties, the court by written order issued and filed of a marriage license to the above named parties, the court by written order issued and filed of a marriage license to the above named parties, the court by written order issued and filed of a marriage license to the above named parties, the court by written order issued and filed or a marriage license to the above named parties, the court by written order issued and filed or a marriage license to the above named parties, the court by written order issued and filed or a marriage license to the above named parties, the court by written order issued and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license to the above named parties and filed or a marriage license and filed or a marriage license and filed or a marria
Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County	Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed	Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed	Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE ase issued by the clerk of the HENDRICKS Circuit Court 19
Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY C	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court 19 Square issued by the clerk of the HENDRICKS Circuit Court 19 Square issued by the clerk of the HENDRICKS Circuit Court 19 Square issued by the clerk of the HENDRICKS Circuit Court 19 Square issued by the clerk of the HENDRICKS Circuit Court 19 Square issued by the clerk of the HENDRICKS Circuit Court 19 Square issued by the clerk of the HENDRICKS Circuit Court 19 Square issued by the clerk of the politice, to-wit:
Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Father Signed Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County Count	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Father Signed Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County Count	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE hase issued by the clerk of the HENDRICKS Circuit Court and Subscribed and wife office, to-wit: hereby certify that on the day of County of County of County of County State Out St
Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE hase issued by the clerk of the HENDRICKS Circuit Court and Subscribed and wife office, to-wit: hereby certify that on the day of County of County of County of County State Out St
Signed Father Signed Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUF HENDRICKS County Count	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE are issued by the clerk of the HENDRICKS Circuit Court of HENDRICKS County of County, State of County, State of County, State of HENDRICKS Late Purpose by the Clerk of the Circuit Court of HENDRICKS
Signed Signed Signed Signed Signed Mother Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County In Be It Remembered, there was filed in my office a marriage licer day of Be it further remembered, the following marriage certificate was filed in my office and marriage liceral my office and marriage liceral my office and marriage and marriage certificate was filed in my office and my office and marriage and marriage certificate was filed in my office and marriage and marriage and marriage liceral my office and marriage and marriage and marriage liceral m	Signed Signed Mother Subscribed and sworn to before me this day of 19

Signed Constant Published HENDRICKS

.....Circuit Court

APPLICATION FOR MA

No. 189

of I.C. 31-1-3-2 Effective July 1, 1977 HENDRICK	
WALE.	County 5- 7-8/ Date of Application
MALE Medical Examination Report Dated 4-29-8	FEMALE
Name of Physician Ulm. Wolf	Medical Examination Report Dated 4-29-81
	Name of Physician Ulm Wolf
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whose shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation or pretense
Name First Mildle Last	FEMALE APPLICANT
Date of Birth Month Day Year	Name First Middle (Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Solph (Deech (Grove) Ino).	Place of Birth (State or foreign country)
Residence Address Street or R. R. Blung State State	Residence Address Street of R. R. City County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Military I. D. Wpicture	Other (Specify) Drues License Upicture
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes \(\sigma\)	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed? No Yes No Yes No Yes No Yes Yes No Yes Yes Yes Yes Yes No Yes Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Ves U	2. Are you afflicted with a transmissible disease? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No
4. Are you now under the influence of intoxicating liquor? No ves -	4. Are you now under the influence of intoxicating liquor? No Yes No Ye
 5. Are you now under the influence of a narcotic drug? No ✓ Yes □ 6. List the full names of any dependent children. 	5. Are you now under the influence of a narcotic drug?
List the full names of any dependent condress.	6. List the full names of any dependent children. Dawn Marie Brunnes
- Ox	- New Tilare Brunner
7. Are you required by any court order or orders to support the above	7. Are you required by any count and
dependent children?	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father flood E. Mary	compliance with any court order or orders issued for their support. 8. Full name of father Tamas Hensley
Residence of father (if deceased so state) Rargo Pla.	Residence of father (if deceased so state) & burg, Ind.
Birthplace of father (State or foreign eguntry) Washama	Birthplace of father (State or foreign country) Jennesell
9. Full maiden name of mother Iscoeta, Vivian Fab Raty	9. Full maiden name of mother Mary Sabel Biera
Residence of mother (if deceased so state) Libraria	Residence of mother (if deceased so state) Burg Ind.
Birthplace of mother (State or foreign country) Metamorse Ind.	Birthplace of mother (State or foreign country) California
State of Indiana. County of HENDRICKS State of Indiana I depose and state the information given in this application is true and correct.	State of Indiana. HENDRICKS Ses: I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of Share Sh
Signed John Maj	Signed Landing M. pourses
New Address fluitefuldy The	New Address Tullingue
Subscribed and sworn to before me this day of day of 190	Subscribed and sworn to before me this day of HENDRICKS
They fam Russell Clerk HENDRICKS Circuit Court	They fall Clerk Tierdonicks 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, UTA IDDICKS ss:
County of HENDRICKS ss:	County of HENDRICKS
Signed Father	Signed
Signed Mother	Signed Mother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of19
Clerk	
COMPLETE	T. A marriage license having been refused to the above named parties, the
TENDRICKS Co	urt by written order issued
authorizes and directs the issuance o	i a marriage itemse to the
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
of Indiana dated the	, 19.44
	$n\alpha$
1, Janes & Carlowski	hereby certify that on the County of Hold
one thousand nine hundred and	County, State of
State of Indiana Communication of the State of the	of State of Sud
and, Bride of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court of
County.	~ < allways
Dated this day of , 19	Signed South Clark
	Official Designation. 1981.
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Clark Plans Sold HENDRICKS Circuit Court
The state of the s	Signed HENDRICKS Circuit Court

STATE OF INDIANA ATION FOR MARRIAGE LICENSE

No. 190

HENDRICKS

..... Circuit Court

ealth under Authority	HENDRICK	County	Date	e of Application
fl.C. 31-1-3-2 ffective July 1, 1977		THE STATE OF THE S	. [OC M
		FEMALE Medical Examination Re	eport Dated 4-C	28-81
MALE Medical Examination Report Dated - 28-81		Name of Physician	Harry Love	\$
Name of Physician Xorry Lovell ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "Fa		the issuance of a license	to marry by any false statemer	it, representation or pr
Name of Thysican	lse statement-Who	ever procures the issuants	DMALE ADDITIONE	
hall be fined in any sum not exceed		F	Middle	0
MALE APPLICANT Middle	O Last	Name Edna	Z. Day	Day
Day Ye	Sattler	Date of Birth Month	3	1915
Pate of Birth Month	1904	Place of Birth (State or foreign co	and Ind	
Place of Birth (State or fogeign country)	A State	Residence Address	or R. R. Lushah	County Stat
esidence Address Street or R. R. City County	al Inol.		enn snegpio	THE WAY
Previous Marital Status: Never Married OR		Previous Marital Status: Never Marr Last Marriage Ended By: Death	Divorce Annulment	
ast Marriage Ended By: Death Divorce Annulment		Date of birth verified by Birth	ertificate Dudicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree		Date of the land	tus Prainte	lià
Other (Specify) Driver Leans of picture		Other (Specify)	ces regiona	No D
Other (Specify) L. Are you now or have you ever been adjudged to be of unsound mind?	No Yes	Are you now or have you ever been If answer is "yes", has the adjudica	tion been removed?	No D
If answer is "yes", has the adjudication been removed?	No Yes	2. Are you afflicted with a transmissi		No &
2. Are you afflicted with a transmissible disease?	No D Yes	Are you related to the male applier	ant closer than second cousin?	No 🖾
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor?	No yes -	4. Are you now under the influence of	f intoxicating liquor?	No O
5. Are you now under the influence of maxicating riques.	No Yes	5. Are you now under the influence of		No W
6. List the full names of any dependent children.		6. List the full names of any depende	nt children	
10.11.20.11.20.11.11.11				
7. Are you required by any court order or orders to support the above	No □ Yes □	 Are you required by any court ord dependent children? 	er or orders to support the above	No □
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory			it this Application be accompanied b	y satisfactory proof that y
compliance with any court/order or orders issued for their support.		compliance with any court order	rorders issued for their support.	1. 1. 2
3. Full name of father James aucheurn Gather		8. Full name of father	wer very	Solder
Residence of father (if deceased so state) Residence of father (if deceased so state)		Residence of father (if deceased so st	ate) Degla	sea
Birthplace of father (State or foreign country) Wayerfy Jens	nessoo	Birthplace of father (State or foreign	n country 1	cane
Full maiden name of mother Ollen L. Jones		9. Full maiden name of mother	Martha Ja	ne Eggess
Residence of mother (if deceased so state) Receased		Residence of mother (if deceased so	state) Loces	essed
Birthplace of mother (State or foreign country) Mauerly, Jen	enessee	Birthplace of mother (State or foreign	en country Roacid	ale Ino.
State of Indiana. HENDRICKS as: I depose and state the in this application is	information given	State of Indiana,	I depose an	d state the informatio
County of TENDRICES in this application is	true and correct.	County of HENDRICKS	in this app	of the and
Signed XCC Marion A	athri	Signed.	X Educ &	·Nay
New Address	01	New Address	Same as 4	home -
Subscribed and sworn to before me this	J 198	Subscribed and sworn to before m	ne this Z day of	11/04
7 ary Josepherk HENDRICKS	Circuit Court	Mary and t	resself derk H	ENDRICKS Circu
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PAR		
We, the parents, of this applicant hereby give consent for this marriage. I		We, the parents, of this applican	t hereby give consent for this	marriage. If only one
signs, state facts which render the consent of the other parent unnecessar	у	signs, state facts which render t	he consent of the other parent	unnecessary

		40.4.5	TO THE CONTROL OF THE PARTY OF	
State of Indiana, County of HENDRICKS ss:		State of Indiana,		
county of		County of HENDRICKS	88:	
Signed		Signed		######################################
Signed		Signed		-200
Subscribed and sworn to before me thisday of	, 19	Subscribed and sworn to before n	ne this day of	
	Clerk		V.	
COMPLETE IF MARRIAGE LICENSE ISSUED BY OF	EDER OF CO.	DM 4		
COMPLETE IF MARRIAGE LICENSE ISSUED BY OR HENDRICKS County authorizes and directions.	OF COU	KT. A marriage license having	g been refused to the a	bove named parti
in authorizes and dire	ects the issuance	of a marriage !!		a
RETURN OF MAR	RRIAGE LICEN	CE AND	ove named parties.	
Be It Remembered, there was filed in my offic	e a marriage lic	SE AND MARRIAGE CERTIL	FICATE	
of Indiana dated the day of day of Be it further remembered, the following marriage costificions	Muy	to the clerk of the	HENDRICKS	Circui
Be it further remembered, the following marriage certificate	and the	and Edna I	rizing the joining togeth	ner as husbana a
1 Richard M H has certificate	was filed in my	office, to-wit:	D-V	
one thousand nine hundred and		that on the	day of	
one thousand nine hundred and State of Indiana, Groom Andrew Marion G	at/in	at satesville	, County o	Hend
		C. A	Carrier Charles at	1 - 1 0 C
County a marriage	licemen :	Commendation	County, State of	1 try
Dated this day of Day	70	the Clerk of t	he Circuit Court of	HENDRICKS
	19.81	·		
Filed and recorded in accordance		Signed R	chard III A	10/000
Filed and recorded in accordance with the laws of the State	of Indiana this	Official Designation M	Inster	
		day of the		10

Form Prescribed By Indiana State Board of Health under Authority of 1C 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 19/

Circuit Court

HENDRIC	Company
MALE 5-1-81	Data of Application
Medical Examination Report Dated 9-7-87	FEMALE
Name of Physician / Cololy	Medical Examination Report Dated 5-1-8/
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement, MS	Name of Physician Melson D. Baddy
shall be fined in any sum not exceeding five numbered dollars (\$500,00)".	Name of Physician Melson D. Baddy noever procures the issuance of a license to marry by any false statement, representation or pretense
Name Girst Middle	
John a. Case	Name FEMALE APPLICANT
Date of Birth Month 12 22 1940	Date of Birth Month
Platot Birth (State or togolen jountry)	Place of Riveh /St.
Residence Address Street or R. R. City County State	Place of Birth (State or foreign fountry)
2409 Late Offactors Indpls Rend Ind	Residence Address Street or R. R. City County (State)
Previous Marital Status Never Married OR	Previous Marital Status N
Last Marriage Ended By Death Divorce Annulment Date of birth verified by Birth Certificate Dudicial Decree	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Appendix
Date of birth verified by Dital Certificate Judicial Lecree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No W Yes	Other(Specify)
If answer is 'yes' has the adjudication been removed? No Ves O	1. Are you now or have you ever been adjudged to be of unsound mind? No Pyes If answer is "yes" be the division of the second mind?
2. Are you afflicted with a transmissible disease? No Y Y D	If answer is "yes", has the adjudication been removed? No Yes Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Pyes C	3. Are you related to the male applicant of
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
Cody Jon Bacon	6. List the full names of any dependent children.
Breet Man (Brane)	Christopher Carroll Ryan
Kule Illada (Paane)	
Type wany Lacor	
7. Are you required by any court order or orders to support the above dependent children No ☐ Yes ☐ Y	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of factors	8 Full name of father Henry Ofols
Residence of father (if deceased so state) Narran, Oklahoma	Residence of father (if deceased so state) Receased
Birthplace of father (State or foreign country) OKCahoma	Birthplace of father (State or foreign country) Indiana
9. Full maiden name of mother Glenna Lee Wollar	9. Full maiden name of mother Winifred Wall
Residence of mother (if decisioned so state) Narral Ollahoma	(Channel
Birthplace of mother State or foreign country OKlahoma	Residence of mother (if deceased so state)
State of Indiana	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.	County of HENDRICKS ss: I depose and state the information given in this application of true and correct.
John a. Bacon	Cuardo de hasa
(2409 lake of Lantern EDP	Signed Large ha At 1 Notes F /
New Address of Mary 9	New Address 409 hafte of hatter EXO
Subscribed and sworn to before me this day of 100.	Subscribed and sworn to before me this
71 ary Jose Tussel Clerk HENDRICKS Circuit Court	Thery are Kussel Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
The state of the s	
State of Indiana.	State of Indiana. HENDRICKS } ss:
County of HENDRICKS ss:	County of HENDRICKS
Signed Father	Signed Father
	Signed
	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this 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
HENDDICKS	and he written order Issued
authorizes and directs the issuance of	f a marriage license to the day
	AND MARKIAGE CERTIFICATE LIEUDICKS
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the the inining together as husband and wife
of Indiana dated the	, 10
	nd
I,	ffice, to-wit: hereby certify that on the 30 day of County of County,
A LA VA DA	County of
State of Indiana, Groom Communications of Commun	County, State of County
State of Indiana, Groom and, Bride and Property of State of Indiana, Groom and Bride and a state of Indiana, Groom and Indiana,	County, State of HENDRICKS
of the united in the same license assued for the	The party of the same of the s
County.	Signed Dillian Dishar
Dated this 30 day of May 1981	
	Official Designation , 19 5
Filed and recorded in accordance with the laws of the State of Indiana this	a day of Residence Clerk
accordance with the tuto of the	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By	R MARRIAGE LICENSE
Indiana State Board of Health under Authority of I.C. 31-1-3-2 HENDR	ICKS County Date of Application
Effective July 1, 1977	
01	FEMALE Medical Examination Report Dated 5-5-8/
MALE Medical Examination Report Dated 5 - 5 - 7	Name of Physician Monag Walter
	Name of Physician
THE ANSWERFO IC 31-1-3-6 prescribed "False statement"	Whoever procures the issuance of a license to marry by any false statement, representation or preter
shall be fined in any sum not exceeding live hands	FEMALE APPLICANT
MALE APPLICANT Marco First Middle Last	Name First Middle Flast
Kenneth M. Henry	Date of Birth Month Day 19 Year
Date of Birth Month Day	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	
3326 311201001	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married □ OR Last Marriage Ended By: Death □ Divorce □ Annulment □	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) D/L w/Ricture	Other (Specify) D/C W/ficting
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No □ Yes □	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "ves", has the adjudication been removed?	
2. Are you afflicted with a transmissible disease?	
3. Are you related to the female applicant closer than second cousin? No. Yes Are you pow under the influence of intexicating liquor? No. Yes	
V. Are you now under the introduce of movements in the very large	
 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 	6. List the full names of any dependent children.
Stocky Marie Henry	
	4518444
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No Ves
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	
8. Full name of father house less than the support.	8. Full name of father Salva Lom Heleman
Residence of father (if deceased so state)	
0000	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother	9. Full maiden name of mother of Congard Toursal dur
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) benefile; 300 1
Birthplace of mother (State or foreign country) State of Indiana,	Birthplace of mother (State or foreign country)
County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information gives in this application is true and corre
Signed Rennett Mi Henry	
New Address 3 2465 So aslown and 46	Signed Kathy Jan Theeman
Subscribed and sworn to before me this S day of May 19 8	New Address Later Of Chokut of Chick Blog
May Jone Russella, HENDRICKS	Subscribed and sworn to before me this day of 100 m
Circuit Court	1 Day and Pusse Glerk HENDRICKS Circuit Cou
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one pare
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 rates which render the consent of the other parent unnecessary.
State of Indiana,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed	County of TENDRICKS
Signed Father	Signed Father
Subscribed and sworn to before me this day of	SignedMoth
, 19	Subscribed and sworn to before me thisday of, 19
Clerk	Cle
HENDRICKS LICENSE ISSUED BY ORDER OF COU	URT. A marriage license having been refused to the above named parties, the
in County	URT. A marriage license having been refused to the above named parties, the Court by written order issued and file
	a mailiage license to the
Re At Domanhand	SE AND MARKET
of Indiana dated the day of Marriage lie	cense issued by the clerk of the HENDRICKS Circuit Countries and and wife office, to-wit:
Be it further remembered the Cl	, 19. d., authorizing the joining together as husband and wil
1, Since A. Or arriage certificate was filed in my	g office, to-wit:
one thousand nine hundred and	and stry for seeman y office, to-wit: hereby certify that on the 23 day of May at Brownsburg
State of Indiana, Groom Kenneth M. H.	hereby certify that on the 23 day of May of Montage County of Herd County, State of Load
and, Bride Kathy A. Freeman	of Maxion County of Kill
County a marriage license issued to	County State of
Dated this 23 day of May , 19	or that purpose by the Clerk of the Circuit Court of HENDRICKS
19	wall court of

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

Official Designation Rastos

Signed Many of HENDRICKS

.. Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County File__

- I DAICK	
MALE Medical Examination Report Dated 4-30-81	FEMALE Date of Application
	Medical Examination Report Dated 4-30-8/
Name of Physician Ally Jovall	7
ALL QUESTIONS MUST BE ANSWERE 10 LC. 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (8500.00)".	Name of Physician Allry Swall
shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	ver procures the issuance of a license to marry by any false statement, representation or pretense
Name First / Middle	FEMALE APPLICANT
Clause Xienes Wern with	Name First Middle J Last
Short 20 Year	Date of Birth Month Day Traley
Place of Birth (State or foreign Jountry)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Part Sund
171 John & Flamfuld In.	Residence Address Street or R. R. City - County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married Q OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) A pleeses	() 4
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D	Other (Specify) M. Mense
If answer is "yes", has the adjudication been removed? No No No Nes O	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Vyes O	If answer is "yes", has the adjudication been removed? No Yes No Yes No Yes No
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Ves
4. Are you now under the influence of intoxicating liquor? No 🖯 Yes 🗆	4. Are you now under the influence of intoxicating liquor? No Yes D
5. Are you now under the influence of a narcotic drug? No Ves O	5. Are you now under the influence of a narcotic drug? No Yes D
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes Very control of the c	dependent children? No Ves
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Aurard C - Wirossett	compliance with any court order or orders issued for their support.
Day DI	d
Residence of father (if deceased so state)	Residence of father (if deceased so state) Wellasta
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother of mener Till Tarland	9. Full maiden name of mother Wolfelt Persey
Residence of mother (if deceased so state) And plo, In	Residence of mother (if deceased so state) Flaunfills, In
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana.	State of Indiana. HENDRICKS Sa: I depose and state the information given in this application is true and correct.
County of HENDRICKS sa: in this application is true and correct.	County of
Signed Meril D. Derosset	Signed Tamara See Fraley
New Address RR-1 Box 418	New Address RRI BOX 418 T
	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me this day of HENDRICKS	Clerk HENDRICKS Circuit Court
Clerk Circuit Court	
CONSENT OF BARENTS BARENT OR CHARRIAN	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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts
State of Indiana.	State of Indiana, HENDRICKS Secretarian
County of HENDRICKS \$88:	County of
Signed Father	Signed
Signed	Signed
Signed	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of, 19	Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County County	ourt by written order issued
in and directs the Issuance	01 & Marie 0
- convo	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licer	nse issued by the clerk of the
the It Remembered, there was filed in my opice Mais	
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
Be it further remembered, the following marriage certificate was fied it is	. County of
one thousand nine hundred and \$881	at County, State of
State of Indiana, Groom Clasil G. Derosser	Hood of CKS County, State of LITHINGS
and, Bride Tanara Com	HENDRICKS that courses by the Clerk of the Circuit Court of HENDRICKS
were by me united in marriage as authorized by a marriage accuse issued	Λ $+$ V_{-}
	1. Signed Dewey H. Inachston
Dated this day of A	Signed Winster 8
	Official Designation May Control of Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	HENDRICKS COURT
The same of the sa	Signed Circuit Court

Form Prescribed By

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

5-8-81 Date of Application

Indiana State Board of Health under Authority of LC 31-1-3-2 Effective July 1, 1977 FEMALE Medical Examination Report Dated_ 8-581 5-5-81 MALE Medical Examination Report Dated Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretent shall be fined in any sum not exceeding five hundred dollars (\$500,00) MALE APPLICANT Name Date of Birth 10 Place of Birth (State Residence Address Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Manulment Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by: 1. Are you now or have you ever been adjudged to be of unsound mind 1. Are you now or have you ever been adjudged to be of unsound mind? No O Yes O If answer is "yes", has the adjudication been removed? No D yes D If answer is "yes", has the adjudication been removed 2. Are you afflicted with a transmissible disease No Yes 2. Are you afflicted with a transmissible disease 3. Are you related to the male applicant closer than second cousing you related to the female applicant closer than second cous-Are you now under the influence of intoxicating liquor? No Yes 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes 5. Are you now under the influence of a narcotic drug? List the full names of any dependent children. List the full names of any dependent children. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in 8. Full name of father Linux Residence of father (if deceased so state, Residence of father (if deceased so state) Birthplace of mother (State or foreign country)_ Birthplace of mother (State or foreign country) State of Indiana, State of Indiana, ose and state the information given **HENDRICKS** County of. County of ... **HENDRICKS** 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana, County of. HENDRICKS County of .. Signed Father Signed. Mother 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 ..authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... HENDRICKS of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, to-wit:hereby certify that on the... one thousand nine hundred and .day of State of Indiana, Groom County 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 .. County, State of

Signed.

.. Circuit Court

HENDRICKS

Official Designation.

Signed ..

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

Form Prescribed By Indiana State Board of Health under Authority

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

STATE OF INDIANA

HENDRICKS

.Clerk

... Circuit Court

Health under Additional of LC 31-1-3-2 Effective July 1: 1977 HENDRIC	MARRIAGE LICENSE No/ File
MALE	County
Medical Examination Report Dated	FEMALE Date of Application
Name of Physician & Juliu	Medical Examination Report Dated 4-27-81
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement, March 1997, 1997	Name of Physician Schwing noever procures the issuance of a license to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding five nundred dollars (8500,00)",	oever procures the issuance of a license to marry by any false statement, representation or procure
Name First Middle O A flori	
Date of Birth Mouth Cay Beach Least &	Name First Middle
Chiquest 8 1950	Date of Birth Most
Crie, Pennsylvonia	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 elector, freling
Previous Marital Status: Never Married OR	40 M. Freen St. Brownslever State
Last Marriage Ended By Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No ✓ Yes ☐ If answer is "yes", has the adjudication been removed? No ☐ Yes ☐	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? Now Yes -	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Ves D	2. Are you afflicted with a transmissible disease? No. 2. Yes No. 2
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin? No ✓ Yes □ 4. Are you now under the influence of intoxicating liquor? No ✓ Yes □
 5. Are you now under the influence of a narcotic drug? No □ Yes □ 6. List the full names of any dependent children. 	5. Are you now under the influence of a narcotic drug? No Yes
0. List the full marines of any dependent entitiers.	6. List the full names of any dependent children.
	William Doniel Eston New y
	The state of the s
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Ø Yes □
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Harry Ray Brechbul Sr.	compliance with any court order or orders issued for their support. 8. Full name of father Thomas Cleven Market
Residence of father (if deceased so state) Nesa, Q,	Residence of father (if deceased so state) North Salem and
Birthplace of father (State or foreign gountry) Shio	100
9. Full maiden name of mother Sylvice Choinabi	Birthplace of father (State or foreign country)
	9. Full maiden name of mother States Made Clark
	Residence of mother (if deceased so state) Will Solan, fu
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) & noliver
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct.
Hamosof Bullia VIII	De Land P Shad
Signed for the formation of the signed of th	Signed M. M. A. Bhire
New Address W N' SHOW St. DEMNSON W	New Address 40 10 Dilla Dt D Rung
Mory Jour Russell Gerk HENDRICKS Circuit Court	Subscribed and sworn to before me this day of Way, 1981. Mary Yore Russell Clerk HENDRICKS Circuit Court
CONTRACTOR	
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana.	State of Indiana, HENDRICKS ss:
ounty of HENDRICKS ss:	County of
Signed Father	Signed Father
Signed Mother	Signed
ubscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19,
day of	Clerk
The state of the s	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
TENDRICKS Co	urt by written order issued
Mal Lucko - Pro Tare and directs the issuance of	f a marriage license to the
authorizes and directs the lossantes	AND MARRIAGE CERTIFICATE HENDRICKS
RETURN OF MARRIAGE LICENSI	1 1. Also alore of the
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
Be It Remembered, there was filed in my office a marriage licen	19 S. authorizing the joining together as husband and wife
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen Indiana dated the day of a	nd Delana Market State of the pointing together as husband and wife
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen Indiana dated the day of a	nd Delana 2 day of day of
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen f Indiana dated the day of a e it further remembered, the following marriage certificate was filed in my of	nd 19.51, authorizing the joining together as husband and wife fice, to-wit: hereby certify that on the day of County of County,
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen and the day of a e it further remembered, the following marriage certificate was filed in my of the thousand nine hundred and	nd 19.5., authorizing the joining together as husband and wife fice, to-wit: hereby certify that on the day of County of County, State of County,
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen f Indiana dated the day of e it further remembered, the following marriage certificate was filed in my of the thousand nine hundred and tate of Indiana, Groom	nd 19.5, authorizing the joining together as husband and wife nd 20.5 de
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen f Indiana dated the day of e it further remembered, the following marriage certificate was filed in my of the thousand nine hundred and thate of Indiana, Groom and, Bride ere by me united in marriage as authorized by a marriage license issued for the	nd leave day of day of County of County, State of County, State of HENDRICKS
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen f Indiana dated the day of e it further remembered, the following marriage certificate was filed in my office thousand nine hundred and tate of Indiana, Groom	nd 19.5, authorizing the joining together as husband and wife fice, to-wit: hereby certify that on the day of County of County, State of County, State of HENDRICKS

STATE OF INDIANA N FOR MARRIAGE LICENSE

No. 196

Indiana State Board of Health under Authority of I.C. 31-1-3-2 HENDRICK	S County Date of Application
Effective July 1, 1977	DEMAIR C C C
MALE 4-22-81	Medical Examination Report Dated 3-8-8
Medical Examination Report Dated	Name of Physician / awen E. Christia
Name of Physician ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whomas and according five hundred dollars (8500,00)".	ever procures the issuance of a license to marry to any false statement, representation or preten-
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "Faise statement shall be fined in any sum not exceeding five hundred dollars (8500,00)".	FEMALE APPLICANT
shall be fined in any sum not exceeding the MALE APPLICANT	Name Migale D part.
Name First Mydle Burns	Date of Birth Month Day Year
Date of Birth Month Day Year	Place of Birth (State or foreign counts)
Place of Birth (State or foreign country)	Golple Laner
Residence Address Street or R. R. City Squnty	Residence Address Street of R. K. Steed Ind.
10 Michael Dr. Glad Nend. Jan.	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By Death Divorce Annulment D
Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Last Marriage Ended By: Death Divorce	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Driver dicina y sicturo
Other (Specify) Wrules School of Mind?	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes" has the adjudication been removed" No D Yes
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease. No Yes
A re you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yet
4. Are you now under the influence of intoxicating liquor? No Yes No Yes	4. Are you now under the influence of intoxicating liquor? No Yes Are you now under the influence of a narcotic drug? No D Yes
5. Are you now under the influence of a narcotic drug.	6 List the full names of any dependent children
6. List the full names of any dependent children.	
Jennifer de Kurno	
	7 Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children?	dependent children* No Ves
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court-order or orders issued for their support. 8. Full name of father Alexa Chell Courts 8. Full name of father Alexa Chell Chelle Courts 8. Full name of father Alexa Chelle	compliance with any court order or orders issued for their compone.
Residence of father (if deceased so state)	Residence of father of deceased so states Indian Indian Indian
lande a se	· laderly Ino
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Place South	9 Full maiden name of mother Shareh Parish Sand
Residence of mother (if deceased so state)	Residence of mother (if decreased so state)
State of Indiana, I denote and state the information gives	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.	State of Indiana. County of HENDRICKS as: I depose and state the information give in this 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 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 applicati
Signed & Vavid J. Duns	Signed X Moureen E. Dakin
New Address 4638 Cornelius - Indpls.	New Address 4638 Sonnelius Indplo
Subscribed and swopm to before me this	X CYIAL XI
Mary and Punnell . HENDRICKS	Subscribed and aware to before me this day of June 10
Circuit Court	The Cherk HENDRICKS Circuit Com
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one pares
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, County of HENDRICKS } ss:	State of Indiana.
County of MENDRICKS	County of HENDRICKS 88:
Signed	Signed Father
Signed	Organica and American
Subscribed and sworn to before me thisday of19	CAR ILEA
Clerk	Subscribed and sworn to before me this day of
	The state of the s
HENDRICKS County	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County	ourt by written order issued and file
PETUDAL OF ST	of a marriage license to the above named parties.
Be It Remembered there was all it MARRIAGE LICENS	E AND MARRIAGE CERTIFICATION
of Indiana dated the day of May	Circuit Court Cour
Be it further remembered, the following marriage certificate was filed in my	and authorizing the joining together as husband and wil
1 Report of the state of the st	office to
I,	hereby certify that on the day of May
State of Indiana, Groom Lavid L. Burns	at Lides Country of Massaw
one thousand nine hundred and S State of Indiana, Groom S and, Bride S were by me united in marriage as authorized by	County, State of
and, Bride	that purpose but
Dated this day of	that purpose by the Clerk of the Circuit Court of HENDRICKS

Signed

.Circuit Court

HENDRICKS

Official Designation

Signed ...

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

.Clerk

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

No. 197

File	
May //	1901
Date of	Application

MALE Medical Examination Report Dated 4-30-81	Date of the last o	FEMALE Date of Application	
Name of Physician M. Liganore	The second second	FEMALE Medical Examination Report Dated 4-30-81	
	1		-
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "F	alse statement-Who	Name of Physician M. Sigenore Dever procures the issuance of a license to marry by any false statement, representation or	
MALE APPLICANT		If	pretense
Name First Middle	Last	Name FEMALE APPLICANT	
Date of Birth Month Day	app	First Midgle , Ass	2
Place of Birth (State or foreign country)	57	Date of Birth Month Day Year	
Togonsport, Indiana	The state of the s	Place of Birth (State or foreign country) 19.59	
122 Williams Dr. Opt K. Browsbur		Residence Address Street or R. R. City County St	
Previous Marital Status: Never Married OR	1	Juliage Brownsteurs In	dione
Last Marriage Ended By: Death Divorce Annulment Annulment	and some beat of	Previous Marital Status: Never Married OR	
Date of birth verified by: Birth Certificate Judicial Decree	The Saldberg	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	EM
Other (Specify) Drivers Lie W/Pic			
1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes 🗆	Other (Specify) Drivers Lie w/pic.	STATE OF
If answer is "yes", has the adjudication been removed?	No□ Yes□	Are you now or have you ever been adjudged to be of unsound mind? No If answer is "yes" has the adjudged to be of unsound mind?	Yes 🗆
2. Are you afflicted with a transmissible disease?	No Yes 🗆	2. Are you afflicted with a transition of the control of the contr	Yes
Are you related to the female applicant closer than second cousin? Are you now under the influence of intoxicating liquor?	No Yes 🗆	3. Are you related to the male and	Yes O
4. Are you now under the influence of intoxicating fiquor? 5. Are you now under the influence of a narcotic drug?	No D Yes D	4. Are you now under the influence of intoxicating liquor?	Yes D
6. List the full names of any dependent children.	No a les		Yes 🗆
		6. List the full names of any dependent children.	
7. Are you required by any court order or orders to support the above		The second secon	
dependent children?	No□ Yes□	7. Are you required by any court order or orders to support the above dependent children?	J Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory	proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that y	
compliance with any court order or orders issued for their support.		compliance with any court order or orders issued for their support.	
8. Full name of father Saving Wayne Tropp		8. Full name of father Curtis Foster Weble	50.0
Residence of father (if deceased so state) / Nownsburg , Andle	ova	Residence of father (if deceased so state) Brownsburg, Indiana	
Birthplace of father (State or foreign country)	1	Birthplace of father (State or foreign country) Incliora	to the same of
9. Full maiden name of mother Sis Coon Westbrook	2	9. Full maiden name of mother Mortha Lone Owens	-
Residence of mother (if deceased so state) Brownsburg, And	liona	Residence of mother (if deceased so state) Brownsleurs, Indion	a
Birthplace of mother (State or foreign country) Ha.			
State of Indiana	information given	Birthplace of mother (State or foreign country) Ondiana. I denose and state the information	a given
County of HENDRICKS ss: I depose and state the in this application is	true and correct.	State of Indiana. HENDRICKS Bas: I depose and state the information in this application is true and	correct.
Signed William J. Jupp	100	Signed Janell Lee Welt	2
New Address 122 K William Dr. Brow	nsburg	New Address 125 Williams Dr apt K	
Subscribed and sworn to before me this 11 day of May	81	Subscribed and sworn to before me this	A STATE OF THE PARTY OF THE PAR
Mory Yone Russell Clerk HENDRICKS		MI HENDRICKS	
The derk derk derk	Circuit Court	Juni you jeussee Clerk Circu	it 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. It	forth 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	
signs, state facts which render the consent of the other parent unnecessary		signs, state facts which fends	
			11 7 1 7 1
State of Indiana,	Land of the said	State of Indiana, HENDRICKS ss:	
County of HENDRICKS } ss:			
Signed	Father	Signed	Father
Signed	The second second second	Signed	The state of the s
	Mother		Mother
Subscribed and sworn to before me this		Subscribed and sworn to before me thisday of	
Subscribed and sworn to before me thisday of	19		
	, 19	Subscribed and sworn to before me thisday of	19Clerk
	, 19	Subscribed and sworn to before me this	19Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORI	DER OF COUR	Subscribed and sworn to before me thisday of	19Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORI HENDRICKS County inauthorizes and direct	DER OF COURT	Subscribed and sworn to before me this day of	19Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORI HENDRICKS County in authorizes and direct	DER OF COUR'	Subscribed and sworn to before me this day of the above named parties are the above named parties. T. A marriage license having been refused to the above named parties are the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit	19Clerk es, the d filed Court
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORI HENDRICKS County in authorizes and direct RETURN OF MARI Be It Remembered, there was filed in my office	DER OF COURT Country Country	Subscribed and sworn to before me this day of day of the day of day of the day of day of the day of	19Clerk s, the d filed Court wife
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Filed and recorded in accordance with the laws of the State of Indiana this.....

APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By	ON FOR MA	ARRIAGE LICENSE	File
Indiana State Board of Health under Authority of I.C. 31-1-3-2	HENDRICKS	County	Date of Application
Effective July 1, 1977			Date of Application
		FEMALE Medical Examination Report Date	d 5-4-81
MALE Medical Examination Report Dated 5-4-81			Love 10
Medical Examination Report		Name of Physician	
Name of Physician Jary Javal ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "Fals ALL QUESTIONS MUST BE ANSWERED in the prescribed of the prescr	se statement - Whoever	procures the issuance of a license to marry by	any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed Transhall be fined in any sum not exceeding five hundred dollars (\$500,00)".		FEMALE A	PPLICANT
MALE APPLICANT		Name O O First	Middle Last
Name First Middle	Last	Claire les	Day Year
Date of Birth Month Day	r	Date of Birth	16 1957
Place of Birth (State or foreign country)		Place of Birth (State or foreign country)	Indiana
Stuttgart, West Ser	State	Residence Address Street or R/R.	City County State
Residence Address Street or R. R. City County	a Date.	RIDXIDITA	and and
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OR	neulment O
Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce A Date of birth verified by: Birth Certificate	Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree			1.
ting we can be as a second	tura	Other (Specify) Drive	, wense w perture
Other (Specify)	No Yes O	1. Are you now or have you ever been adjudged to be	
Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No Yes	If answer is "yes", has the adjudication been remo-	
2. Are you afflicted with a transmissible disease?		2. Are you afflicted with a transmissible disease?	No ≯Yes □
3. Are you related to the female applicant closer than second cousin?	****	3. Are you related to the male applicant closer than the influence of interviewing line	
4. Are you now under the influence of intoxicating liquor?	No Yes	 Are you now under the influence of intoxicating li Are you now under the influence of a narcotic dru 	
5. Are you now under the influence of a narcotic drug?		Are you now under the influence of a harcotte dru List the full names of any dependent children.	707165
6. List the full names of any dependent children.			
7. Are you required by any court order or orders to support the above	No□ Yes□	 Are you required by any court order or orders to s dependent children? 	support the above No Yes O
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory pro-		If answer is "yes", it is required that this Application	
compliance with any court order or orders issued for their support.	01	compliance with any court order or orders issued	
8. Full name of father Owon Owannes Johan	rus Dadohan	& Full name of father Samuel	Ralph Via yo
Residence of father (if deceased so state) & A California	-GA	Residence of father (if deceased so state)	ytan, Ind.
Birthplace of father (State or foreign country) Salmas H. Dr	18-00	Birthplace of father (State or foreign country)	Didiana
	4	110.	Daniel O Brance
9. Full maiden name of mother Hangista Liane Lydia Messe		9. Full maiden name of mother	Jewest Myg
Residence of mother (if deceased so state) layton, Ind.	1/	Residence of mother (if deceased so state)	igton Ind
Birthplace of mother (State or foreign country) Musich, W. J	Termony	Birthplace of mother (State or foreign country)	Indiara
State of Indiana, County of HENDRICKS 88: I depose and state the infinithis application is true.	formation given ue and correct.	State of Indiana, County of HENDRICKS	s: I depose and state the information given in this application is true and correct.
valte of all.		County of	
Signed Welling tookum godshar		Signed	Dinise Via
New Address RT #1 Box 157114 Steleville S.	The state of the s	New Address Rt 1 Box	157 AA Stilewille In.
Subscribed and sworm to before me this day of a	19.8/.	Subscribed and sworn to before me this	day of May 198)
lary and usself Clerk HENDRICKS (Circuit Court	Mary Jane Kussel	Clerk HENDRICKS Circuit Court
			T. J. Stell
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GUA	RDIAN
We, the parents, of this applicant hereby give consent for this marriage. If c	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		signs, state facts which render the consent of	
			Principle of the Control of the Cont
State of Indiana,			***************************************
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	8:
Signed		County of HENDRICKS	
Signed	Father	Signed	Father
	Mother	Signed	
Subscribed and sworn to before me this	19	Subscribed and sworn to before me this	day of, 19
	Clerk	and the this	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	ED OF		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDI HENDRICKS	ER OF COURT.	A marriage license having been refu	sed to the above named parties, the
HENDRICKS County authorizes and direct	s the is-	t by written order issued	and filed
DEMUNY	and of a	marriage license to the above named p	parties.
Re It Romembarah	AGE LICENSE	AND MADDY LOW	
of Indiana dated the day of day of Be it further remembered, the following marriage certificate we	Cesse license	issued by the clerk of the	HENDRICKS Circuit Court
Be it further remembered the		, 198 authorizing the i	oining together as husband and wife
Be it further remembered, the following marriage certificate we like the same thousand rive to the same thousand rivers to the same that the same thousand rivers to the same than the same than the same than the same that the same than the same that the same than the same than the same than the same than t	as filed in my office	e, to-wit:	(ail
one thousand nine hundred and S State of Indiana, Groom of school Jeaching and, Bride Sang Source	at.	Page that on the 30	day of 11 any
and, Bride Days Donne Wolfer	Godshar	Hand	, County of the
State of Indiana, Groom Satschila Joachim and, Bride Santa S	of	No a D. Con	inty, State of
County.	ense issued for tha	tt purpose by the Cl.	unty, State of Wholeys
were by me united in marriage as authorized by a marriage lice County. Dated this	181	og the Clerk of the Circuit C	ourt of HENDRICKS
	, 13	6:	
Filed and recorded in accordance with the laws	Off	Signed Signation Signation	Macheton
Filed and recorded in accordance with the laws of the State of	Indiana this	The section with the section of the	J

Signed.

HENDRICKS

... Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

	Thomas .
File 42	masil and tulning all

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Medical Exemination Report Date Section of Physician Section Sectio	MALE Medical Examination Report Dated		Date of Application
MADE OF PROPERTY AND THE ANALYSIS IN the Language of the Company o			Medical Evamination
MALE APPLICANT WALE APPLICANT Note MALE APPLICANT Note MALE APPLICANT Note Male Male Male Male Male Male Male Male			Dated 5-5-8
MALE APPLICANT Note	OURSTIONS MUST BE ANSWERED, LC, 31-1-3-6 presented at		Name of Physician Malvin S. Boil 1
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The series of th	First A Middle		FEMALE APPLICANT
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Size of Lange Highest States or Research Control of the Second Con	Date of Birth Month Pay Ye	ar d	- Last
Figure 2 and 1 and	Place of Birth (State or foreign country)	0	Day Year
The part of their New Years of 10 Bit Continues D	Andie Kapples, on		Place of Birth (State or foreign country)
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Throw the filter Secret Secret World Secret One County Secret Sec	F.O. Day lat Plangeld	And	2 City Court
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Description of the control of the co			Date of birth verified by: Birth Certificate Judicial Decree
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Theorem of the control and support of the special property of the special control of the control		No□ Yes□	
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Birthplace of flathers Name or here on country of the content of the collection of t	Residence of father (if deceased so state) of notion afeling for		Residence of father (if deceased so state) Sindala, Sindala,
Residence of mathers of discrement and mathers of discrement of the in application is true and correct. Signed Mathers Address Signed Mathers of this application is true and correct. Conserv of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent were, date facts which render the consent of the other parent unnecessary Signed Mathers Signed Mathers and were to before me this day of Signed Mathers and were to before me this day of Signed Mathers and 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 Mathers Address Signed Mathers and were to before me this day of Signed Mathers and were to before me this day of Signed Mathers and were to before me this day of Signed Mathers and were to before me this day of Signed Mathers and were to before me this day of Signed Mathers and directs the issuance of a marriage license to the above named parties. Signed Mathers Address Add	Birthology of father (State or foreign country) Ly lions		
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State of Indiana. New Address Stated Auth Assay Charactery New Address Scherold Auth Assay Charactery New	1 1.		Residence of mother (if deceased so state)
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Salectived and swoon to before me this	Kitt Jerou Chownen	W	Logical allenger
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County Co			
County County Written order lace to the above named parties. authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit C RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit C And And And And And And And An	COMPLETE	ED OF COUR	T A marriage license having been refused to the above named parties, the
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Be it further remembered, the following marriage certificate was filed in my office, to-wit: A	Memembered, there was filed in my office a	marrage treens	19. 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	mutana dated the 22 day of	11.101	racing la Bailey.
one thousand nine hundred and State of Indiana, Groom and, Bride of	Beit with P. Chowning	ar	ffice, to-wit:
one thousand nine hundred and State of Indiana, Groom and, Bride of	Juriner remembered, the following marriage certificate wo	is filed in my of	certify that on the 23 day of 11
State of Indiana, Groom County, State of County, State of Mariana, Groom County, G			
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 Signed Stephen J. Malosky	one thousand nine hundred and	0	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 of County. Dated this Signed Stephen J. Malosky			
County. Dated this Signed Stephen J. Malorky			
County. Dated this Signed Stephen J. Malorky	vero by		hat purpose by the Clerk of the Circuit Court of
Dated this 23 Signed Stephen	County me united in marriage as authorized by a marriage lice	nse issued for t	
Official Designation 9 1 19 11	Dated this	180	Stephen J. Malorry
Official Designation , 19 81	day of May	, 193	Signed Priest
and the state of t		1	Official Designation
filed on 2	Filed and	VE VI	and day of Clerk
una recorded in accordance with the laws of the State of Indiana this.	and recorded in accordance with the laws of the State of I	ndiana this	Signed May of Hay Report Clerk HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

Health under Authority	CATION FOR MA	ARRIAGE LICENSE	File 5-14-81 Date of Application
Effective July 1, 1977		FEMALE Section Report Date	ed 4-27.81
MALE Medical Examination Report Dated	-8/	Medical Examination Report Date Name of Physician	is Dlack
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescrit	and "False statement - Whoeve	r procures the issuance of a license to marry by	any false statement, representation or pretense
ALL QUESTIONS MUST BE AN WERED. I.C. 31-1-3-6 present shall be fined in any sum not exceeding five hundred dollars (8500)	.00)".	FEMALE A	APPLICANT
MALE APPLICANT	last —	Name First	Middle Last
Name Stirst Middle	Lewes It -	Date of Birth Month	Day Yest
Date of Birth Month Day	Year -	Place of Birth (State or foreign country)	758
Place of Birth (State or for fign country)		Residence Address Street or R. R.	City County State
Residence Address Street or R. R. City C	State State	Previous Marital Status: Never Married OR	Maureslung Ju.
Previous Marital Status: Never Married OR		Last Marriage Ended By Death Divorce A	Annulment 🗆
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	Judicial Decree
Date of birth verified by:		Other (Specify)	duce
Other (Specify)	No □ Yes □	1. Are you now or have you ever been adjudged to b	be of unsound mind? No D Yes D
Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No□, Yes□	If answer is "yes", has the adjudication been remo	oved" No D Yes D
2. Are you afflicted with a transmissible disease?	No ♥ Yes □	2. Are you afflicted with a transmissible disease	No B Yes D
3. Are you related to the female applicant closer than second cousin?	No W Yes	Are you related to the male applicant closer than Are you now under the influence of intoxicating leads to the influence of in	
4. Are you now under the influence of intoxicating liquor?	No □ Yes □	Are you now under the influence of a narcotic dri Are you now under the influence of a narcotic dri	
5. Are you now under the influence of a narcotic drug?	140 - 168 -	6. List the full names of any dependent children.	
6. List the full names of any dependent children.		Ted Wayne Kays	
121, 301, 311		Amanda Jan X	aus
7. Are you required by any court order or orders to support the above dependent children?	No□ Yes□	Are you required by any court order or orders to dependent children?	support the above $$N_0 \square $\ Y_{es} \square$$
If answer is "yes", it is required that this Application be accompanied by satis			tion be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.		compliance with any court order or orders proceed	for their support.
8. Full name of father Laward W. Stwlo	Ja.	8. Full name of father	· Cameron
Residence of father (if deceased so state) Layton Sa		Residence of father (if deceased so state)	Misg. Su.
Birthplace of father (State or foreign country)	7.0.	Birthplace of father (State or foreign country)	Til
9. Full maiden name of mother was all make	ane	9. Full maiden name of mother / Ollles	val Dartee
Residence of mother (if deceased so state)	h.	Residence of mother (if deceased so state)	ttobao Su.
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country)	Asd.
County of HENDRICKS in this applicati	te the information given on is true and correct.	State of Indiana, County of HENDRICKS	ss: I depose and state the information given in this application is true and correct.
Signed Educad BK	eui	Signed Kasa	and the a
New Address 2356 Nowling	LANE	New Address 335 6	Moulin Lane
Subscribed and sworn to before me this day of day of Mental Clerk HEND	1	Subscribed and sworn to before me this 14	day of TOM, 19
	- Court	or party fine value	Gerk
CONSENT OF PARENTS, PARENT OR GUARDIAN	- 1 -	CONSENT OF PARENTS, PARENT OR GU.	ARDIAN
We, the parents, of this applicant hereby give consent for this marr		We, the parents, of this applicant hereby give	e consent for this marriage. If only one parent
signs, state facts which render the consent of the other parent unn	ecessary	signs, state facts which render the consent of	f the other parent unnecessary
			The state of the s
State of Indiana, County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	88:
Signed	Father	,	
Signed		Signed	Father
Subscribed and annual to be		Signed	Mother
	Clerk	Subscribed and sworn to before me this	day of 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY	V OPDED OF THE	A marriage lies 1	
HENDRICKS County authorizes an	Cou	rt by written order issued	used to the above named parties, the
		a marriage license to the above	no stice
Be It Remembered there was fill in	MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE	parties.
of Indiana dated the	~ // V-F-1001	tooned by the clerk of the	HENDRICKS Circuit Court
of Indiana dated the day of Be it further remembered, the following marriage continues.	(1 LQ)	, 19 9 , authorizing the	joining together as husband and wife
1, Joseph D. Di Son	icate was filed in my off	ice, to-wit.	**************************************
State of Live and and State of Live and State of	***************************************	that on the 23	day of
one thousand nine hundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by	a a	He Canton	County of Attack
County County	lage license in	C	ounty, State of LENDRICKS
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 19			
	, 19	Signed	0 10)

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

Official Designation...

HENDRICKS

APPLICATION FOR MARRIAGE LICENSE

- 111 01	County	
S-14-81 Date of Application		ALE edical Examination Report Dated 5-7-81
Date of Application		edical Examination Report Dated
1-7-81	Medical Examination Report Dated 5-7-8	ame of Physician R.K. Stegenoller
E00 - 00	Name of Physician RK. Steam	UESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—V fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT
- Jenocles	oever procures the issuance of a license to many	fined in any sum not exceeding five hundred dollars (\$500.00)".
atement, representation or pret	a needise to marry by any false statement, rej	MALE APPLICANT
	Name Final F	Robert Eucles & Last
The state of the s	First O Middle	Birth Month Day
2 ston	Date of Birth Month	Birth (State or foreign country)
Year	Place of Birth (State or fopeign country)	and.
20		e Address Street or R. R. City County State
County State	Residence Address Street or R. R. City Co	- millon
County State	Clauter Clauter	Marital Status Never Married OR
the state of the second	Previous Marital Status: Never Married OR	riage Ended By Death Divorce Annulment D
PROPERTY OF PERSONSE	Last Marriage Ended By: Death Divorce Annulment D	irth verified by Birth Certificate Judicial Decree
ee days a second	Date of birth verified by: Birth Certificate Judicial Decree	aig la f. Permaner
	4 Other (Specify) D. & wy pict	Other (Specify) The April 200 April
The second liverage of the second	1. Are you now or have you ever here.	ou now or have you ever been adjudged to be of unsound mind? No Yes Yes Yes
	Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	wer is "yes" has the adjudication been removed? No O Yes O su afflicted with a transmissible disease?
No □ Ye	2. Are you afflicted with a transmissible disease?	No H Tes U
No □ Ye	Are you related to the male applicant closer than second cousin?	us related to the female applicant closer than second cousin? No Yes Use now under the influence of intoxicating liquor?
	Are you now under the influence of intoxicating liquor?	No A Yes U
No Ye	5. Are you now under the influence of a narcotic drug?	e full names of any dependent children
No ▼ Ye	6. List the full names of any dependent children.	
	David	range "Jassi
		restina
	akikeal	ichan
	Cil sources	a required by any court order or orders to support the above
ove	7. Are you required by any court order or orders to support the above	ent children? No Ves V
No □ Yes	dependent children:	er is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
nied by satisfactory proof that you ar	If answer is "yes", it is required that this Application be accompanied by satisfa-	ance with any court order or orders issued for their support.
rt. The Free Lot & N Date Co.	compliance with any court order or orders issued for their support.	meditather Que & Quino
	8. Full name of father Toul Fathon	see of father (if deceased so state) and come . And
Company of the company	Residence of father (if deceased so state) Securação	3/0
ame)	Birthplace of father (State or foreign country) Olabourg	ace of father (State or foreign country)
Bongs	0	iden name of mother Phis MALANU. Davis
town of the same	of the mander name of mother	ce of mother (if decreased so state)
sol.	Residence of mother (if deceased so state) Quantum.	0
and the second second	Birthplace of mother (State or foreign country)	diana.
and state the information giv		HENDRICKS In this application is true and correct.
application is true and corre	County of in this application	1 20 30
Litson	Signed X Tamela X Letso	Sixon to Co. 3 To
10 Clayton, In	New Address RR3 Box 3240 Cla	New Address (3 Dop 324) Claylon on.
11. 0 81	Subscribed and sworn to before me this	and sworn to before me this 14 day of Man 19
C 4		HENDOLING
Circuit Cou	Mary Jone Russell Clerk HENDRIC	Clerk Court Court
	CONSENT OF PARENTS, PARENT OR GUARDIAN	OF PARENTS, PARENT OR GUARDIAN
his marriage. If only one pare	We, the parents, of this applicant hereby give consent for this marriage	rents, of this applicant hereby give consent for this marriage. If only one parent
ent unnecessary	signs, state facts which render the consent of the other parent unneces	facts which render the consent of the other parent unnecessary
	State of Indiana,	liana,
	State of Indiana, HENDRICKS County of	HENDRICKS **:
Fathe	Signed	
		Signed Father
	Signed	Signed Mother
, 19	Subscribed and sworn to before me thisday of	and sworn to before me this day of
Cler		
		Clerk
above named parties, the	. A marriage license having been refused to the above nar	TE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR
and filed	et by written order issued	MENDRICKS
	a marriage license to the above named parties.	County
	WARDLACE CERTIFICATE	authorizes and directs the issuance of
Circuit Cour	AND MARRIAGE CERTIFICATE HENDRICKS	RETURN OF MARRIAGE LICENS
ther as husband and wife	e issued by the cities of the initial together as hu	Be It Remembered, there was filed in my office a marriage licen
	, 19.8, authorizing the joining together as hu	dated the day of May
	I rock leave	sport F I non
ino	reby certify that on the day of June County of the	her remembered, the following marriage certificate was filed in my o
of Herd.	Clauton County of Ho	1 C Moures
of Ind	County, State of The	nd nine hundred and
of Ind	County State of 1	ndiana, Groom & doet & Lane
HENDRICKS	HENDR	Kamela L. Letson
of o	Herd County, State of	nd nine hundred and Shank to Lane of the united in marriage as authorized by a marriage license issued for

Official Designation.

HENDRICKS

....Clerk Circuit Court

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

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

5-14-8 Date of Application

.Circuit Court

HENDRICKS

202

The state of the s	FEMALE Medical Examination Report Dated 5-7-81
MALE Medical Examination Report Dated 5 - 7-87	Name of Physician G M Snikouic
Name of Physician A. Sinkovic	Name of Physician
The state of the s	pever procures the issuance of a license to marry by any false statement, representation or pretent
shall be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT	First Middle
Name First Middle Last	Name Carole a. Just
Date of Birth Month Day Year	Date of Birth Matth 29 1959
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Place of Birth (State or foreign country) Regland
Posidores Address Street or R. R. City/ County State	Residence Address Granging R. R. R. Jity County State
3923 Dan Jone Rd Siga Men Co	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by. Birth Certificate Judicial Decree
	Other(Specify)
Other (Specify) No Yes 1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Vies
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed" No D Yes 2. Are you afflicted with a transmissible disease" No WYES
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No WYes
 3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? 	4. Are you now under the influence of intexacating liquor No Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.
6. List the full names of any dependent children.	6 List the full names of any dependent constant
	7 Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children? No Yes	dependent children" No Ves
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are compliance with any court order operators issued for their support.
compliance with any court order or orders issued for their support. 8. Full name of father Ohn Tormer Tormer	8. Full name of father Nervick Land.
Residence of father (if deceased so state) Plausfield (Avon) Incl.	Residence of father (if deceased so state) Sulple Ind.
Birthplace of father (State or foreign country) Including	Birthplace of father (State or foreign country) Lesby England.
9. Full maiden name of mother Uwan L. Jones	9. Full maiden name of mother Doris Mary Footer
Residence of mother (if deceased so state) Sign (Avon) Sucl.	Residence of mother (if deceased so state) Suelplo Suel.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Hucknall, Knottingham
State of Indiana, HENDRICKS 88: I depose and state the information given for this application is true and correct.	State of Indiana, I depose and state the information give
County of this application is true and correct.	County of HENDRICKS as: in this application is true and correct
Signed X John Jalemen L X #X	Signed X Carole A Just
New Address D. T. H. O. G. China Co. D. H. C.	New Address 5941 Coquines, Roy Dr and
Subscribed and sworn to be fore me this day of HENDRICKS	Subscribed and sworn to before me this 14 day of 11004, 1921
Clerk HENDRICKS Circuit Court	1 / ary Jane Kussel Clerk HENDRICKS Circuit Cou
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one pare
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	the state of the consent of the state parent uniterestally
	-13
State of Indiana, County of HENDRICKS ss:	State of Indiana.
osumy of the same	County of HENDRICKS
Signed Father	Signed Fath
Signed	Signed Moth
Subscribed and sworn to before me thisday of19	Subscribed and sworn to before me thisday of
Clerk	Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COM	
HENDRICKS County	RT. A marriage license having been refused to the above named parties, to
nauthorizes and directs the issuance	of a marriage license to the
Be It Remembered the RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	Timestal Con
Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and	nse issued by the clerk of the HENDRICKS Circuit Countries of the HENDRICKS Circuit Co
Commission of the control of the con	office, to-wit:
ne thousand nine hundred and State of Indiana, Groom	hereby certify that on the 2
The state of the s	day of har on the day of
and Bride Carol Co	of House County of Philadeline
vere by me united in marriage as authorized by a marriage light	County State of
vere by me united in marriage as authorized by a marriage license issued for Oated thisday of	that purpose by the Clerk of the Circuit Court of HENDRICKS
County. Dated this day of Marriage license issued for 19.5	Ann
filed and recorded in accordance with the	Official Description Control Official Description
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
	day of

Health under Authority of 1C 31 1-3 2 Effective July 1 1977	MARRIAGE LICENSE
of IC 31 Post Effective July 1 1973	CS THE 7 &
MILE	County
MALE Medical Examination Report Dated 5-11-81	FEMALE Date of Application
Name of Physician Ox E. Deeman	Medical Examination Report Dated 5-11-81
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	Name of Physician May & Freezeway
MALE APPLICANT	ter procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle Last	Name FEMALE APPLICANT
Date of Birth Month Play Year	First Middle Lost
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Address Street or R. R. City C.	Place of Birth (State or foreign country)
122 Calchust O burg	Residence Address Street or R. R. City County State
Previous Marital Status Never Married OR	Child O Vays
Date of birth verified by Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment
Date of birth verified by Sirth Certificate - Sudicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) D A W Pict	D. & Wordt
1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes	1 Are you now on the
If answer is "yes" has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes	If answer is "yes", has the adjudication been removed? No Yes
2. Are you afflicted with a transmissible disease? No Yes 3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intexticating liquor? No A Yes -	3. Are you related to the male applicant closer than second cousin? No No Yes -
5. Are you now under the influence of a narcotic drug? No D Yes C	4. Are you now under the influence of intoxicating liquor? No A Yes No Yes No Yes No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
1 Jenn	James
7. Are you required by any court order or orders to support the above dependent children No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support	compliance with any court order or orders issued for their support.
8. Full name of father Supplied And Control of the	8. Full name of father Vallas H. Vallet
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother	9. Full maiden name of mother way to thenderson
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Jack willo Harda
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
1 Monta Ille Of	Signed & May Louis Sours
New Address 122 Oakkunst Brownslaing Zug	New Address 122 OAKlust Brownbury Inl
E W 8	Subscribed and sworn to before me this 5 day of 2, 1951
M HENDBICKE	Many Russ Court HENDRICKS Circuit Court
Clerk TETORICES Circuit Court	TOETA COUNT COUNT
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS	County of Father
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day 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
authorizes and directs the issuance of	1 a marriage
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of ag	se issued by the title, authorizing the joining together as husband and wife
of Indiana dated the 19 day of	· Mary L. Goins
Be it from Land in my 0	mce, to-wit.
1. George Davis	hereby certify that on the
one thousand nine but the second	at Drownson State of Indiana
one thousand nine hundred and State of Indiana, Groom Silvin Sugar	dead Clean County, State of Indiana,
State of Indiana, Groom Sing Sing Sing Sing Sing Sing Sing Sing	that purpose by the Clerk of the Circuit Court of
County.	2 Davis
Dated this	i treorge with

Official Designation.

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

....Clerk

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

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A	Data of A - 1
Ų.	ate of Application

51 - 2- Tr 52	FEMALE Medical Examination Report Dated 5-8-8/
MALE 5-8-8/	Medical Examination Report Dated
MALE Medical Examination Report Dated 5-8-8/	Name of Physician M. Oronoff
Name of Physician M. Oronoff	ever procures the issuance of a license to marry by any false statement, representation or pretense
To all 1.3-6 prescribed "False statement	DEMALE APPLICANT
shall be fined in any sum not exceeding the	Middle
MALE APPLICANT Middle Middle	Name Jaura Beth Helmond
Name Michael Robert Wear	Date of Birth Month Day Year
Date of Birth Month 30 1958	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Indiarapolis, andland
Residence Address Street or R. R. City County State	Residence Address Street R. R. Plainfield State
Residence Address Street of R. R. Cincinnoti Homilton Ohio	Manual B OR
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment
Last Marriage Ended By: Death Divorce Annulment D	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
Other (Specify) Drivers Lio W/Pic	Other (Specify) Drivers Lie Uffic
	1. Are you now or have you ever been adjudged to be of unsound mind? Now Yes C
1. Are you now or have you ever been adjudged to be of unsound filled.	If answer is "yes", has the adjudication been removed? No Yes
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease? No 2 Yes 0
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No FYes C
3. Are you related to the female applicant closer than second cousin.	4. Are you now under the influence of intoxicating liquor? No Yes O
4. Are you now under the influence of intoxicating liquor? No Yes Yes	5. Are you now under the influence of a narcotic drug? No Yes C
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.	6. List the full names of any dependent children.
o. Mas the full hangs of any dependent children.	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No□ Yes□
dependent children?	dependent children? No Ves If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	
8. Full name of father Court Swilley Courte	8. Full name of father board of their support
(1: (1: A: 2) /:	
Residence of father (if deceased so state) William Chut	Residence of father (if deceased so state) Flarifield, Indiana
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Andlong
9. Full maiden name of mother Caroyla Conn Duiko	9. Full maiden name of mother Cruma Leon Houlsins
Residence of mother (if deceased so state) Cincinnati, Ohio	Whankild bedien
n li	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) UNUS	Birthplace of mother (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.	State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.
Signed Michael A Could New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of May 1981.	ATCH TANGETON AND AND AND AND AND AND AND AND AND AN
New Address 144 (raymont Drive, Walnut Creek C.	New Address 144 Cragmont Drive Wolned Drew Subscribed and sworn to before me this 15 day of May 1951
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of May . 1961. More fore Pussell Clerk HENDRICKS Circuit Court	New Address 144 Cragnort Drive Wolned Cragnort Subscribed and sworn to before me this 15 day of May 1987
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of Man 198/. Many fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	New Address 144 Cragmont Drive Wolned Drew Subscribed and sworn to before me this 15 day of May 1951
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of May . 1961. More fore Pussell Clerk HENDRICKS Circuit Court	New Address 144 Cragmont Drive Wolned Drive Drive Drive Wolned Drive Drive Drive Wolned Drive Driv
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of Man 198/. Many fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	Subscribed and sworn to before me this 15 day of 1957 Mory Yoro Russell Clerk HENDRICKS Circuit Cour CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of May 1961. More fore Pussell 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	New Address 144 Cragmont Drive Wolned Drive Drive Drive Wolned Drive Drive Drive Wolned Drive Driv
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of May 1961. More fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 15 day of 1957 Mory Yoro Russell Clerk HENDRICKS Circuit Cour CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of May 1961. More fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 15 day of 1957 Mory Yoro Russell Clerk HENDRICKS Circuit Cour CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one paren
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of May 1961. More fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 15 day of 1957 Mory Yoro Russell Clerk HENDRICKS Circuit Cour CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one paren
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 15 day of Man 1961. More fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS	Subscribed and sworn to before me this 15 day of 1957 Mory Yoro Russell Clerk HENDRICKS Circuit Cour 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.
New Address 444 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 5 day of Man 196/. Many foxe Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } ss:	Subscribed and sworn to before me this 15 day of 1957 Mory Yoro Russell Clerk HENDRICKS Circuit Cour CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one paren
New Address 444 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this. 5 day of Man 196/. Many foxe Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } ss:	Subscribed and sworn to before me this
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this 15 day of 1961. More for Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS } Signed Father	Subscribed and sworn to before me this /5 day of //63 1957 Mory Yoro Fussell Clerk HENDRICKS 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, County of HENDRICKS Signed Father
New Address 444 (regmont Drive, Walnot Creek C. Subscribed and sworn to before me this. 5 day of Man 196/. Many fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } ss: Signed Father Signed Mother	Subscribed and sworn to before me this
New Address 144 (regmont Drive, Walnut Creek C. Subscribed and sworn to before me this 15 day of 1961. More for Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS } Signed Father	Subscribed and sworn to before me this
New Address 444 (regmont Drive, Walnot Creek C. Subscribed and sworn to before me this. 5 day of Man 196/. Many fore Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } ss: Signed Father Signed Mother	Subscribed and sworn to before me this
New Address 194 (ray mont Drive, Walnut Creek C. Subscribed and sworn to before me this day of May 194/ Move fore Pussel Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS } ss: Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk	Subscribed and sworn to before me this
Subscribed and sworn to before me this	Subscribed and sworn to before me this
Subscribed and sworn to before me this	Subscribed and sworn to before me this
New Address 144 (ray mont prive walket Creek C. Subscribed and sworn to before me this day of May 198/. Mory force Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } Signed Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of the consent of the other parent unnecessary.	Subscribed and sworn to before me this
New Address 144 (rag mont Drive, Walket Creek C. Subscribed and sworn to before me this. 5 day of May 196. More for Parents, Parent Or Guardian We, the parents, of this applicant hereby 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: Signed Father Signed Mother Subscribed and sworn to before me this day of 19 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County in authorizes and directs the issuance of the parent was an authorizes and directs the issuance of the parent was an authorized and directs the issuance of the parent was an authorized and directs the issuance of the parent was a	Subscribed and sworn to before me this
New Address 144 (rag mont Drive Walket Creek C. Subscribed and sworn to before me this. 15 day of May 196. We the parents, of this applicant hereby 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 COUR HENDRICKS County in authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE.	Subscribed and sworn to before me this
New Address. 144 (ray mont) Nive Walker Creek C. Subscribed and sworn to before me this.	Subscribed and sworn to before me this
New Address. 144 (ray mont prive pugling Creek C. Subscribed and sworn to before me this	Subscribed and sworn to before me this
New Address 144 (raymon*) Drive Wellot Creek C. Subscribed and sworn to before me this day of Ment Creek C. Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby 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: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County in authorizes and directs the issuance of RETURN OF MARRIAGE LICENS of Indiana dated the day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of Marriage certificate was filed in my office a marriage licer day of M	Subscribed and sworn to before me this
New Address 144 (ragmont Drive Wellart Creek C Subscribed and sworn to before me this day of Med 196/. We the parents, Parent OR GUARDIAN We, the parents, of this applicant hereby 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: Signed Father Signed Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	Subscribed and sworn to before me this day of Moy Ore Pursell Cerk HENDRICKS 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, County of HENDRICKS Signed Signed Mother Subscribed and sworn to before me this day of 19 CIT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE are issued by the clerk of the HENDRICKS Circuit Court of the court in the point of the pointing together as husband and wife the court of the certification of th
New Address 144 (raymon Drive, Welhot Creek County for the forement his day of Many for the forement his day of Many for the forement his day of Many for 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 marriage filed in my of t	Subscribed and sworn to before me this day of Month Correction of the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Signed Mother Signed Subscribed and sworn to before me this day of 18 Certain Court by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE are issued by the clerk of the HENDRICKS Circuit Court of the court by that on the day of the clerk of the day of the parent unnecessary. E AND MARRIAGE CERTIFICATE are issued by the clerk of the day of the day of the clerk of the day of the day of the clerk of the day of
Subscribed and sworn to before me this	Subscribed and sworn to before me this day of Mariage Moderate Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby 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 CIET. A marriage license having been refused to the above named parties, the part by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court authorizing the joining together as husband and wife fince, to-with thereby certify that on the day of County of C
New Address 144 (ray mont Drive Walket Creek C Subscribed and sworn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS } ss: County of HENDRICKS ss: County of Mother Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Coun	Subscribed and sworn to before me this
New Address 144 (ray mont Drive Walket Creek C Subscribed and sworn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS } ss: County of HENDRICKS ss: County of Mother Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Coun	Subscribed and sworn to before me this
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New Address 144 (requary Drive, Welkert Creek C. 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 Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS in authorizes and directs the issuance of RETURN OF MARRIAGE LICENS of Indiana dated the day of 19. Be it further remembered, the following marriage certificate was filed in my office a marriage license in thousand nine hundred and 19. State of Indiana, Groom and, Bride in marriage as authorized by a marriage license issued for County. Dated this day of 19.	Subscribed and sworn to before me this
New Address 144 (requary Drive, Welkert Creek C. 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 Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS in authorizes and directs the issuance of RETURN OF MARRIAGE LICENS of Indiana dated the day of 19. Be it further remembered, the following marriage certificate was filed in my office a marriage license in thousand nine hundred and 19. State of Indiana, Groom and, Bride in marriage as authorized by a marriage license issued for County. Dated this day of 19.	Subscribed and sworn to before me this
New Address 144 (requary Drive, Welkert Creek C. 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 Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS in authorizes and directs the issuance of RETURN OF MARRIAGE LICENS of Indiana dated the day of 19. Be it further remembered, the following marriage certificate was filed in my office a marriage license in thousand nine hundred and 19. State of Indiana, Groom and, Bride in marriage as authorized by a marriage license issued for County. Dated this day of 19.	Subscribed and sworn to before me this
New Address 144 (requary Drive, Welkert Creek C. 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 Mother Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS in authorizes and directs the issuance of RETURN OF MARRIAGE LICENS of Indiana dated the day of 19. Be it further remembered, the following marriage certificate was filed in my office a marriage license in thousand nine hundred and 19. State of Indiana, Groom and, Bride in marriage as authorized by a marriage license issued for County. Dated this day of 19.	Subscribed and sworn to before me this
New Address 144 (ray mont Drive Walket Creek C Subscribed and sworn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS } ss: County of HENDRICKS ss: County of Mother Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Coun	Subscribed and sworn to before me this

..Clerk

... Circuit Court

HENDRICKS

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

STATE OF INDIANA

Health under Authority of I.C. 31-1-3-2	MARRIAGE LICENSE No. 205
Effective July 1, 1977 HENDRIC	- Silver - S
MALE	
Medical Examination Report Dated 5-8-8/	FEMALE Date of Application
Name of Physician Sarry Sovall	Medical Examination Report Dated 5-11-81
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Whe shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Larry Lovall
shall be fined in any sum not exceeding the handred dollars (\$500,00)". MALE APPLICANT	oever procures the issuance of a license to marky by any false statement, representation or pretense
Name First Middle 4 Last	FEMALE APPLICANT
Date of Birth Month Day Year	First Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Street or R. R. / City	Place of Birth (State of foreign country)
Residence and 3 12 Lat # 20 State	Residence Address Street or R.R. City County State
Previous Marital Status: Never Married OR	The state of the s
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) As A Oxcesse	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes" has the adjudication been removed?	1. Are you now or have you and the
If answer is "yes", has the adjudication been removed? No yes 2. Are you afflicted with a transmissible disease? No yes No	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Ves D	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No D Yes D	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No 2 Yes 0
5. Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
Thomas Layer Carolyn Louis	6. List the full names of any dependent children.
Timesthy String	- Der Knoom
Darin Darin	
7. Are you required by any court order or orders to support the above	
dependent children? No□ Yes□	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) deceased	8. Full name of father (if deceased so state) Balinbridge, In
Birthplace of father (State or foreign country)	
9. Full maiden name of mother Silly M.	Birthplace of father (State or foreign gountry)
Residence of mother (if deceased so state) Alcunsed	9. Full maiden name of mother. The form of the state of t
Birthplace of mother i State or foreign country) / CCC	Residence of mother (if deceased so state)
State of Indiana.	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given
County of HENDRICKS 88: in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed Thomas H. Glasins	Signed Berself & Soins
New Address P. R. 8 Box 379 Fat 20	New Address P.R. & Bax 372 Lot 20
Subscribed and sworn to before me this 15 day of // 198/.	Subscribed and sworp to before me this 5 day of 191.
7 and All Musell Clerk HENDRICKS Circuit Court	Many and Thouself Clerk HENDRICKS Circuit Court
CONCOUR	A DEPOSIT OF CHAPPIAN
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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which relact the
State of Ladian	State of Indiana.
State of Indiana, County of HENDRICKS } ss:	State of Indiana, HENDRICKS County of
Signed Father	Signed Father
Signed Mother	Signed
Subscribed and sworn to before me this day of , 19,	Subscribed and sworn to before me thisday of
Clerk	Clerk
	The services license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS	art by written ofuci issued
in authorizes and directs the issuance of	f a marriage license to the above named parties.
cmarci	AND MARRIAGE CERTAIN LIENDON
Be It Remembered there was filed in my office a marriage ucen	se issued of
of Indiana dated the 9th day of 2009 Be it further remembered, the following marriage certificate was filed in my of 1, 2000	nd ffice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of I,	nereby certify that on the day of day of
of Indiana Cross	Country State of
State of Indiana, Groom and, Bride of were by me united in marriage as authorized by a marriage license issued for to County.	he the Clark of the Circuit Court of HENDRICKS
were by me united in marriage as authorized by a marriage license issued for t	
Dated this 30 day of May 1981	Signed Color C. Maures
	Signed Signation 81

Signed..

APPLICATION FOR MARRIAGE LICENSE

No	206	
		_

... Circuit Court

Health under Authority	MARRIAGE LICENSE	File
of I.C. 31-1-3-2 Effective July 1, 1977 HENDRIC	KSCounty	Date of Application
MALE Medical Examination Report Dated 5-/3-8/	FEMALE Medical Examination Report Name of Physician	Dated 5-13-81
Xalan + Venue		
Who MIST BE ANSWERED 1 C 31-1-3-6 prescribed "False statement - Who	oever procures the issuance of a ficense of	tepresentation or preter
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	FEMAL	Middle (
Name LEFFSt Middle Middle Mass	Name March Manth	Plane aster last
Date of Birth Month Day Year (A/A)	The of but	30 1960
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)	hal.
Residence Address Street or R. R. Cay County State	Residence Address Street or R. I	County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married	OR C
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Deap Divorce Date of birth verified by: Birth Certificate	Judicial Decree
Other(Specify)	Other (Specify)	d to be of versioned mind?
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes Yes Yes Yes Yes Yes Yes Ye	Are you now or have you ever been adjudged If answer is "yes", has the adjudication been	(1000)
If answer is "yes", has the adjudication been removed? No a yes	Are you afflicted with a transmissible disease	100
Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer	than second cousin" No V yes
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxical	/
Are you now under the influence of a narcotic drug? No Ves	Are you now under the influence of a narcot List the full names of any dependent childre	
List the full names of any dependent children.		
Are you required by any court order or orders to support the above	7. Are you required by any court order or order	
dependent children? No □ Yes □	dependent children®	No□ Yes C
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order, or orders issued for their suaport.	If answer is "yes", it is required that this App compliance with any court order or orders is	dication be accompanied by satisfactory proof that you are it
Full name of father Syman Namard	8. Full name of father 2mm	11 +
Residence of father (if deceased so state) Clayton In	Residence of father (if deceased so state)	Contisville, In.
Birthplace of father (State or foreign equntry)	Birthplace of father (State or foreign Country)	Ky
Full maiden name of mother fram Wasdworth	9. Full maiden name of mother Alele	a Deberry
Residence of mother (if deceased so state) Clayton, J	Residence of mother (if deceased so state)	Coatesuelle In.
Birthplace of mother (State or foreign country) Vermout	Birthplace of mother (State or foreign country)	4
tate of Indiana, ounty of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana.	I sopose and state the information giver
Signed Went Maynand	County of HENDRICKS	fin this application is true and correct
	Signed 000	coy actor
New Address S. R. Box 189 Coatsuille	New Address SR	gox 189 Costerring on
Many have the	Subscribed and swora to before me this	5 day of Il pay 190/
Clerk HENDRICKS Circuit Court	Mary fore Husse	Clerk HENDRICKS Circuit Court
NSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR	GUARDIAN
e, the parents, of this applicant hereby give consent for this marriage. If only one parent		give consent for this marriage. If only one parent
ns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent	
	See Control	
	The same of the sa	
te of Indiana, HENDRICKS ss:	State of Indiana,	
	County of HENDRICKS	} me:
Signed Father	Signed	Father
Signed	Signed	
scribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this	day of 19
		at the
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT County Count	T. A marriage !	
HENDRICKS County Conauthorizes and directs the issuance of	urt by written order issued	efused to the above named parties, the
authorizes and directs the issuance of	f a marriage license to the above name	and nieu
The Di Kememhered there was 61 1.	AND MADDIAGE	
Indiana dated the day of day o	se issued by the clerk of the	HENDRICKS Circuit Court
it further romemband it aligned	, 196 f, authorizing th	e iniming together as husband and wife
Shank S. Rodaca terrificate was filed in my of	fice, to-wit:	A
the thousand nine hundred and and the of Indiana, Groom and the of Indiana, Groom and the bush of the by me united in marriage as authorized by a marriage license in the sunty.	nereby certify that on the	day of Ma
te of Indiana, Groom	it do	County of Hard
e by me united in manifest	Harl Name	County, State of Jud.
Bride of Indiana, Groom of authorized by a marriage license issued for to	hat mem	County, State of
tee by me united in marriage as authorized by a marriage license issued for to the day of the day o	purpose by the Clerk of the Circuit	t Court of HENDRICKS
ed and recorded in accordance with the laws of the State of Indiana this	Signed Sand	B. D. Kadgers
the State of Indiana this	Just Milliam	0

Form Prescribed By Indiana State Board of Health under Authority of LC. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

PINTORICA	
MALE 5-11/ SI	Date of Application
Medical Examination Report Dated 3-/4-81	LEMALE
Name of Physician O Kourany	Medical Examination Report Dated 5-14-8/
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,000". MALE APPLICANT	Name of Physician Q. Kouranch
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement
MALE APPLICANT	
Name Michael Made	Name First
Date of Birth Month Day Year	Date of Birth Month
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. City County State	Place of Birth (State of foreign gountry)
Residence 2 BOX 254 Clayton Send Sand	Residence Address Street of R. R. City & Cornty & State of
Previous Marital Status Never Married D OR	Softwellow Dr. Danvello Bond Snot
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes U	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes D
0. List the last the	6. List the full names of any dependent children.
	The state of the s
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No □ Yes □ Measurer is "rest" it is required that this Application be accompanied by estimate the second of the second o	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order afforders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Chant drille same	compliance with any court order or orders issued for their support.
8. Full name of father The State of Sta	8. Full name of father ary again while
Residence of father (if deceased so state)	Residence of father (if deceased so state) Daywelle July
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Thoron Such.
9. Full maiden name of mother Mary Gudneta Quan	9. Full maiden name of mother allelman Luthen Swenney
(Alay too and	9. Full maiden name of mother to the state of the state o
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Champaigne St	Birthplace of mother (State or foreign country)
State of Indiana. State of Indiana. HENDRICKS Ss: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of
Signay Michael & Farmer	Signed Allew Th. White
New Address R Q BOX 254 Clayfon In. 46118	New Address R 2 BOX 254 Clayson, In. 46/18
New Address A William A	II GPMII
Subscribed and sworn to before me this day of 19.	Subscribed and sworn to before me this day of HENDRICKS
7 My Jan Russell Clerk HENDRICKS Circuit Court	THAT THE 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 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	signs, state facts which render the consent of the other parent unnecessary
and the consent of the other party and the oth	
State of Indiana,	State of Indiana, HENDRICKS ss:
County of HENDRICKS 88:	V. V. H. H.
Robert Farmer Father	Signed Sauf D. Schull Father
Sixned / · · + · · ·	Signed Mother Mother
Signed Juanuta Harmer Mother	1X
Subscribed and sworn to before me this	Subscribed and sworn to before me this
Mary Jano Russell Clerk	
	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
HENDRICKS County Co	ourt by written order
in and directs the issuance of	or a marriag
DETUDN OF MARRIAGE LICENS	E AND MARKETS
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the day of day of	nse issued by the citer of authorizing the joining together as husband and wife
of Indiana dated the 22 day of Mare	and Sless Manday of May
Bail Muhael L. Sarmer	affice to-wit:
the structure of the following marriage certificate was filed in my of	hereby certify that on the 33 day of County of Lond, at 1220000d
Teven D. Parson	of Hazelwood, County of The ha
one thousand nine hundred and	County, State of
one thousand nine hundred and State of Indiana, Groom	County, State of LICENDEICKS
and, Bride Sherrik. White of	of Hond County, State of Ind County, State of HENDRICKS 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 County.	that purpose by the Sterie of
County.	1. Signed Steven W. Ranson
Dated this 33 day of May, 198	Signed Minister
	Official Designation , 19 8
Dated this day of May, 19.8	Official Designation (19) (19
recorded in accordance with the laws of the State of Indiana state	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

208 5-18-81 Date of Application

... Circuit Court

HENDRICKS

Form Prescribed By	TION FOR MA	ARRIAGE LICENSE	File 42
Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	5-18-8\ Date of Application
		FEMALE Beaut De	5-6-81
MALE STATE Dated	18-	Medical Examination Report Da	indica 9.
Medical Examination Report Dated Name of Physician		Name of Physician H	. C. C say
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed " ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed " (\$500.00)"	"False statement - Whoever	r procures the issuance of a license to marry	by any false statement, representation or prete
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-15-5 prescribed shall be fined in any sum not exceeding five hundred dollars (\$500,00)		FEMALE	APPLICANT
MALE APPLICANT	Last	Name First	Middle Last
Name First Middle	- wonet	Date of Birth Month	Day Year
Date of Birth Month Dax	Year 8	Place of Birth (State or foreign equatry)	92 24,
Place of Birth (State or foreign country)		Such	City County State
Residence Address Street or R. R. City Count	ty State	Residence Address Street of R. R.	600° .
1404 Marky & Star.		Previous Marital Status. Never Married OR	1
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment		Last Marriage Ended By Death Divorce	Annulment
Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	Judicial Decree
6 2 11 1		Other (Specify)	which
Other (Specify)	No Yes 🗆	1. Are you now or have you ever been adjudged to	to be of unsound mind? No Yes
1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No□ Yes□	If answer is "yes", has the adjudication been re	
2. Are you afflicted with a transmissible disease?	No Ø Yes □	2. Are you afflicted with a transmissible disease"	
3. Are you related to the female applicant closer than second cousin?	No ₹ Yes□	3. Are you related to the male applicant closer th	
4. Are you now under the influence of intoxicating liquor?	No D Yes O	 Are you now under the influence of intoxication Are you now under the influence of a narcotic 	
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.	No 3 res	Are you now under the initiative of a second of the full names of any dependent children.	
So has a state of the state of		Jamie	
Denna J.			
mara		No. of the last of	estable .
7. Are you required by any court and are or orders to support the above		7. Are you required by any court order or orders	to support the above
7. Are you required by any court order or orders to support the above dependent children?	No□ Yes□	dependent children	No□ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactor	ory proof that you are in		cation be accompanied by satisfactory proof that you an
compliance with any court order or orders issued for their support. 8. Full name of father.		compliance with any court order or orders issu	sed for their support.
		8. Full name of father	become
Residence of father (if deceased so state)		THE STATE OF THE S	0.0
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	De - 01
9. Full maiden name of mother was hood		9 Full maiden name of mother	Las g. malerias
Residence of mother (if deceased so state)	and.	Residence of mother (if deceased so state)	Donoshy Brd.
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country)	Lidi
State of Indiana, County of HENDRICKS Sas: I depose and state the in this application is	s true and correct.	State of Indiana, County of HENDRICKS	as: I depose and state the information gives in this application is true and corre
Signed Newton M. Sty		(Pa	hotto. Co. In. t.
	ELO INO	Signed	Dual Party Dla
Subscribed and sworn to before me this day of May		New Address / // /	t wow the flank
Many Constituted Clerk HENDRICK	VS.	Subscribed and sworn to before me this	Jo day of 11/200 182
Clerk	Circuit Court	War Lave Kinsel	Clerk HENDRICKS Circuit Con
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR G	TABBIAN
We, the parents, of this applicant hereby give consent for this marriage.	. If only one parent		rive consent for this marriage. If only one pare
signs, state facts which render the consent of the other parent unnecess.	ary		
		signs, state facts which render the consent	of the other parent unnecessary
			AND THE PROPERTY OF THE PROPER
			The state of the s
State of Indiana.			200 - 100 -
County of HENDRICKS ss:		State of Indiana,	
Signed		County of HENDRICKS	
	Father	Signed	Fath
Subscribed and sworn to before me this		Signed	Mot
Subscribed and sworn to before me this	, 19	Subscribed and sworn to before me this	day of, 19
	Clerk		Cl
COMPLETE IF MARRIAGE LICENSE ISSUED BY O HENDRICKS County	RDER OF COURT	A :	
HENDRICKS County authorizes and di	Cour	A marriage license having been re	efused to the above named parties, t
in County authorizes and di	rects the issuance of a	a marriage license to the	n bna vocal de de
TRO THE DOMESTIC OF MARK	IRRIAGE LICENSE	AND MADDIA	
Be It Remembered, there was filed in my off of Indiana dated the day of	ice a marriage license	issued by the clerk of the	HENDRICKS Commit Car
of Indiana dated the day of day of Be it further remembered, the following marriage certificates I,	f Bowle	198 authoris	Circuit Cos
Be it further remembered, the following marriage certificat	e was filed in and	bollotta Cultorizing the	e joining together as husband and w
1, Person Company	juod in my offic	ce, to-wit:	J. T.
Zi i i i i i i i i i i i i i i i i i i		that on the	day of
and Bride & South	10	Howol	County of
were by me united in marriage as cath	of	Hand	County, State of
a the state of the	li ·		County, State of
Dated this day of Many	T 201	the Clerk of the Circuit	t Court of HENDRICKS
		Cianal	N
Filed and recorded in accordance with the laws of the State	Of	ficial Designation	Marie
the State	of Indiana this	ficial Designation day of	[2]

Form Prescribed By Indiana State Board of Health under Authority of 1 C 31-13-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

209

MALE	County 5-18-81
Medical Examination Report Dated 5-5-81	FEMALE Date of Application
Name of Physician / Arten Garfeld	Medical Examination Report Dated S-5-87
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (8500,000"). MALE APPLICANT	Name of Physician Il Partir Garfield
MALE APPLICANT	seer procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle ///Last	Namps / FEMALE APPLICANT
Date of Birth Month Day Year	Date of Birth Kay Portally
Place of Birth (State or foreign country)	Day Day
Residence Adapt of 4 Street of R. R. Stry County State	Place of Birth (State of foreign country) Residence Address Street Ind
Previous Marital Status Never Married OR	7783 C1000 N. R. B. L. City County State
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by D Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Appulment D
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Ves D	Other(Specify)
If answer is "yes" has the adjudication been removed? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No No No No No No No No No N	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Ver
2. Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin? No. 17 to 17 No. 17 to 17 No. 17 to 17 No. 17 to 17 No.	2. Are you afflicted with a transmissible discour?
4. Are you now under the influence of intoxicating liquor? No Yes D	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Vies D	4. Are you now under the influence of intoxicating liquor? No Yes No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	THE RESERVE OF THE PROPERTY OF
dependent children" No D Yes D	7. Are you required by any court order or orders to support the above dependent children?
If answer is 'yes', it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court organ organization issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that we have
8. Full name of father Culture Miller	compliance with any court order or orders issued for their support
Residence of father is decreased so states (Ralple Rawrence) Ind.	or run name of father father for the father
Birthplace of father (State or foreign country) Ul - Urgifia	. 1/ /
9. Full marden name of mother Nellie Marie Perry	Birthplace of father (State or foreign country) Restricted
Residence of mother (if decreased so state) Faiftence Ind.	9. Full maiden name of mother. Drilla S. Pall
Birthplace of mother (State or loveign country) Haslin Kentucky	Residence of mother (if deceased so state)
State of Indiana.	State of Indiana. I depose and state the information given
County of the structure	County of HENDRICKS I depose and state the information given in this application is true and correct.
Signed Lester Wyer	Signed X andrea Costello
New Address 630 5 Whichomb	New Address 630 5 which mb
Subscribed and sworn to before me this day of lay 190.	Subscribed and sworn to before me this day of JIDNONE
Mary Jane Russellaerk HENDRICKS Circuit Court	Mary Jane Russell Glerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
	*
State of Indiana.	State of Indiana, HENDRICKS } ss:
County of HENDRICKS } **:	County of
Signed Father	Signed famus Father
Signed Mother	Signed Salada Cost Clit Mother
Subscribed and sworn to before me this day of	Subscribed and sworn to before me this day of day of least of Clerk
Clerk	Cierk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	A marriage license having been refused to the above named parties, the
HENDRICKS	t by written order issued
authorizes and directs the issuance of	a marriage license to the above that
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE issued by the clerk of the
Be It Remembered, there was filed in my office a marriage license	1884ed by the Color of the initial together as husband and wife
day of Milly	alletas & Castalo
Be it further remembered, the following marriage certificate was filed in my office the state of	ce, to-wit: day of Many,
ne thousand	County of Hard,
tate of Indiana Green	Mories County, State of
ne thousand nine hundred and at. itate of Indiana, Groom of. nd, Bride of me united in the state of the sta	County, State of HENDRICKS
nd, Bride of the sere by me united in marriage as authorized by a marriage license issued for the county.	마리를 마리막이 지역 나는 것 같아야 하는 것 같아 없이 살아 되었다면서 하는데 살아 얼마나 없다.
ated this 22 day of 92, 1981	Aland Duello
day of	
iled on ?	day of Clerk
recorded in accordance with the laws of the State of Indiana this	igned land fine HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

5-18-81 Date of Application

210

orm Prescribed By Idiana State Board of ealth under Authority APPLICATION FOR M. HENDRICKS	S County Date of Application
I.C. 31-1-3-2 ffective July 1, 1977	- Prication
C 15-8/	Medical Examination Report Dated
MALE Medical Examination Report Dated 5-15-8/	Name of Physician Joseph Kislin mo
Name of Physician Seph Herlin Name of Physician Herlin ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoe all Questions must be exceeding five hundred dollars (\$500,00)".	over procures the issuance of a license to marry by any false statement, representation or pretens
OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whole the distallars (\$500,00)".	FEMALE APPLICANT
hall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	First a Miggle Last
Middle that I have	Name Hith J. Pascall
Day Year	Date of Birth March 6 1905
Pate of Birth Month	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address Spreet or R. R. City County State
esidence Address Street/or R. R. Clayton In	31 d / Grand OR
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Marriago Ended Ry Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
ast Marriage Ended by: Birth Certificate Judicial Decree	
Other (Specify)	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Tyes
No Yes	1. Are you now or have you ever been adjudged. If answer is "yes", has the adjudication been removed? No□ Yes
Are you now or have you ever been adjudged to be of discourse. No ☐ Yes ☐ If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease? No Tyes
Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No Tyes
Are you related to the female applicant closer than second cousin.	4. Are you now under the influence of intoxicating liquor? No -Yes
Are you now under the influence of intoxicating liquor? No Yes No Yes	5. Are you now under the influence of a narcotic drug? Ng Yes
List the full names of any dependent children.	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No 2 Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court ofter or orders issued for their support.
compliance with any court order or orders issued for their support. 3. Full name of father (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	8. Full name of father Samuel Laughlin
Residence of father (if deceased so state)	Residence of father (if deceased so state) alogosed
Birthplace of father (State or foreign country) Mussouri	Birthplace of father (State or foreign country) Indiana
martha Phialoth (st)	9. Full maiden name of mother Kathern Lang
9. Full maiden name of mother I favorate a large occur.	Alexand.
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) State of Indiana. I depose and state the information gives
State of Indiana. HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana. County of HENDRICKS Ses: I depose and state the information given this application is true and corrections.
arthur master	Ruth & Pascall
New Address playton	Signed
le mai el	Subscribed and sworn to before me this & day of May 19.5
man ()	
11 Will Jane Plissell Clerk HENDRICKS Circuit Court	Mary and Aussellaerk HENDRICKS Circuit Co
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one par
signs, state facts which render the consent of the other parent unnecessary	
and the parent uniteessary	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS ss:	State of Indiana,
	County of HENDRICKS ss:
Signed	Signed Fa
Signed Mother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this day of
Clerk	day of
HENDRICKS County ORDER OF COU	RT. A marriage license having been refused to the above named parties,
in authorizes and directs the issuance	RT. A marriage license having been refused to the above named parties, Court by written order issued and f
RETURN OF MARKET	of a marriage license to the above named parties.
The It Remembered there was Clair	SE AND MARRIAGE CERTIFICATE
of Indiana dated the and day of marriage lice. Be it further remembered, the following marriage certificate was filed in my I,	ense issued by the clerk of the HENDRICKS Circuit C
Be it further remembered the fall in sate way	, 1981, authorizing the joining together as husband and
1, Robert W	office, to-wit:
one thousand nine hundred and S	at Capton ady of Hand
ana, Bride Date O	County State of
one thousand nine hundred and State of Indiana, Groom	County State of Jed
were by me united in marriage as authorized by a marriage license issued for Dated thisday of, 19	r that purpose by the Clerk of the Circuit Court of HENDRICKS
day of 19	
Filed and manual at the second	Official Decianati
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation

Signed..

.... Circuit Court

HENDRICKS

Form Prescrited By Indiana State Board of Health under Authority of IC 311/3/2 Effective July 1/1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County File___

HENDRICKS

..Clerk

Circuit Court

MALE	County 5-18-81
Medical Examination Report Dated 5-/3-8	FEMALE Date of Application
Name of Physician V. Naggard	Medical Examination Report Dated 5-13-87
	Name of Di
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement-Wh	Haggard W. Haggard
MALE APPLICANT	Name of Physician — Haggard Hoever procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle	
Variet 411. No. 71)	Name Firey
Date of Birth Month Day	Date of Birth Sheela Middle Art 1
Place of Birth (State or foreign country)	Day Over
Residence Addressay O Stylet of R. R. Co County	Place of Birth (State or foreign country)
3/03 & Clark Creek Ld Inches Novel , Jace 1	Residence Address Stre Houto Smal
Previous Marital Status Never Married & OR	RI BUNDA 7 PARTY 1 County \ State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital State of Marital State of State
Date of birth verified by Birth Certificate Dudicial Decree	Previous Marital Status: Never Married GOR
Date of birth verified by Sertificate Justicial Decree	Last Marriage Ended By: Death Divorce Annulment
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
1 Are you now or have you ever been adjudged to be of unaound mind?	Other(Specify)
If answer is "yes" has the adjudication been removed?	1. Are you now or have you guest be a line of the line
2. Are you afflicted with a transmissible disease?	If answer is "yes" has the adjudication
No Jest	2. Are you afflicted with a transmitted
3. Are you related to the female applicant closer than second cousin? No 2 yes 0	3. Are you related to the mole and the mole
4 Are you now under the influence of intoxicating liquor? No 1 yes 0	3. Are you related to the male applicant closer than second cousin? No Yes 4. Are you now under the information in the infor
5. Are you now under the influence of a narcotic drug? No Ves D	4. Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug? No Yes
6 List the full names of any dependent children.	6. List the full names of any dependent children.
	any dependent children.
	100 · 100 ·
	THE RESERVE OF THE PERSON OF T
7. Are you required by any court order or orders to support the above	7. Are you required by
dependent children' No O Yes O	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support
8. Full name of father. JORGAN CREEK SOUTH	8. Full name of father Welliam Wayne Goen
Residence of father (if decembed so state). Uppable	
Birthplace of father (State or foreign country)	Residence of father (if deceased so state) The Common Comm
Put 80 . L. H m.	Birthplace of father (State or foreign country) Deolford , In .
9 Full maiden name of mother Curable Mother	9 Full maiden name of mother Relecca Joan Davis
Residence of mother of decreased so states # # # # # # # # # # # # # # # # # # #	Polal Ind
Birthplace of muther Scale we foreign country Incleana	Residence of mother (if deceased so state)
State of Indiana.	Birthplace of mother (State or foreign country) Level Haule Inc.
County of HENDRICKS and I depose and state the information given in this application is true and correct.	State of Indiana. HENDRICKS Sa: I depose and state the information given in this application is true and correct.
- 0 mm 0 .1	County of this application is true and correct.
Signed & January M. Salt	Signed Skuld G. Xorn
New Address 3603 S. Clarks Creek Rd.	New Address 3603 S. Clarko Geek Rd. #5
Subscribed and sworn to before me this 18 day of May 1881	Subscribed and sworp to before me this day of 1981.
Mario James De 12 M HENDOLOGO	Mary David Russia Q HENDRICKS
Circuit Court	Circuit Court
FREE BUILDING	
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 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	signs, state facts which render the consent of the other parent unnecessary
the country of the other parent uniteresty	
The second secon	
State of Latin	
State of Indiana, County of HENDRICKS } **:	State of Indiana, HENDRICKS State of Indiana,
Signed Father	Signed Father
Signed Mother	Signed
	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me this day of . 19	
Clerk	Clerk
COMPLETE	license having heen refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage needs having been and filed and filed
HENDRICKS County Cou	art by written order issued and filed
authorizes and directs the issuance of	a marriage license to the above many
THE PROPERTY OF LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licens	e issued by the clerk of the
of Indiana dated the day of Mar	
Daniel the day of May	July Low
Be it further remembered, the following marriage certificate was filed in my off	ereby certify that on the day of County of County of
La la la following marriage certificate was peed to be	ereby certify that on the day of the
one thousand nine hundred and S	Mosesselle County of Marion,
the thousand nine hundred and S	County State of
State of Indiana, Groom Daniel M. Speth of	County, State of HENDRICKS HENDRICKS
and, Bride Shares Sould	HENDRICKS Has the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for the County.	at purpose of the
Dated this	Signed Paris Sink Chief of fact
10 01	and the second s
Dated this day of May, 1981.	Signed Signed Whish of Jesus Chiet Da

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

212 42 File_ 18-81 Date of Application

Form Prescribed By Indiana State Board of APPLIC	CATION FOR MA	ARRIAGE LICENSE	File 40	
Health under Authority of I.C. 31-1-3-2	HENDRICKS	County	Date of Appli	3
Effective July 1, 1977		FEMALE Boost D	5-4-81	
MALE	-81	Medical Examination Report D	ated	
Medical Examination Report Dated		Name of Physician	I feely	
Name of Physician 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Whoever Whoever	r procures the issuance of a license to marry	by any false statement, represen	tation or pretense
TO 21 1.3-6 prescribe	d "False statement = White to	FEMALI	E APPLICANT	
Shall be fined in any sum not exceeding five hundred dollars (\$500.0 MALE APPLICANT		Name First	Middle	Last
Name First Middle	Last.	Cordina	Day Y	Bonold
Date of Birth Month Day	Year	Date of Birth	2-2	55
Place of Birth (State or foreign country)		Place of Birth (State or foreign country)	. City County	6,
5 No 11	anty State	Residence Address Street or R. R.	nton	State
PO- Box 265 Clayton		Previous Marital Status: Never Married 🗷 0	R	
Previous Marital Status: Never Married OR		Marriage Ended By Death Divorce	Annulment U	
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by. Birth Certificate	D Judicial Decree	
Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree		Q Other (Specify)	. toigid.	
Other (Specify) Dist specify	No Yes O	Other (Specify) Are you now or have you ever been adjudged	to be of unsound mind?	No Pyes D
1. Are you now or have you ever been adjudged to be of unsound mind?	No Tes D	If answer is "yes", has the adjudication been	removed*	No□ Yes□
If answer is "yes", has the adjudication been removed?	No A Yes	2. Are you afflicted with a transmissible disease	e ³	No M Yes D
2. Are you afflicted with a transmissible disease?3. Are you related to the female applicant closer than second cousin?	No Yes -	3. Are you related to the male applicant closer		No Yes D
4. Are you now under the influence of intoxicating liquor?	No P Yes	 Are you now under the influence of intoxicat Are you now under the influence of a narcoti 		No Yes U
5. Are you now under the influence of a narcotic drug?	No Ø Yes □	Are you now under the influence of a macco List the full names of any dependent children		, , , , ,
6. List the full names of any dependent children.				
frank H. Cummings				
		7. Are you required by any court order or order	rs to support the above	
7. Are you required by any court order or orders to support the above dependent children?	No □ Yes □	dependent children?		No □ Yes □
If answer is "yes", it is required that this Application be accompanied by satisfi-	actory proof that you are in	If answer is "yes", it is required that this App		y proof that you are in
compliance with any court order or orders issued for their support.		compliance with any court order or orders is	sued for their support.	
8. Full name of father the state of the stat	8	Residence of father (if deceased so state)	la Lenot al	
Residence of father (if deceased so state)			Sugar H. D	
Birthplace of father (State or foreign country)	softetta ?.	Birthplace of father (State or foreign country)	bearings and	
9. Full maiden name of mother to active 1.	SEAN THON	9. Full maiden name of mother	man of the com	
Residence of mother (if deceased so state)	-d	Residence of mother (if deceased so state)	O to	
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country		
State of Indiana, County of HENDRICKS Sas: I depose and state in this application	the information given is true and correct.	State of Indiana. County of HENDRICKS	as: I depose and state the in this application is	information given
Signed Roger Dale Cum		- × C	arolyn anold	7
New Address. Challen Line	0	Signed PC	Rolais Clarton	In
Subscribed and sworn to before me this. day of Ms	180	New Address	18 110	18.
Mosey Some Respell Clark HENDR	ICKS 19.31.	Subscribed and sworn to before me this	day of HENDRICKS	
Clerk	Circuit Court	Mesof fore here	Clerk HENDRICKS	Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR	GUARDIAN	
We, the parents, of this applicant hereby give consent for this marris	age. 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 unnec	essary	signs, state facts which render the conser		
State of Indiana,		_		
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	} ss:	
Signed		Southly Of the Control of the Contro		
Signed	II.	Signed		Father
Subscribed and sworn to before me thisday of		Signed		Mothe
		Subscribed and sworn to before me this	day of	19
	Clerk		A. S. C. C. S. S. C.	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY HENDRICKS County	ORDER OF COURT	. A marriage license having been	refused to the shows name	ed parties, the
				and file
in authorizes and	directs the issuance of	a marriage license to the above nan	med parties	
RETURN OF	A DDY I G			
of Indiana dated the day of	office a marriage licens	e issued by the clerk of the	HENDRICKS	Circuit Cour
of Indiana dated the 22 day of	May	, 198/, authorizing	the joining together as hu	
I, sext some hundred and some thousand nine hundred and	hh	ereby certify that and the		
and, Bride Brown & Branch		The state of the s	County Class of I had	A.
and, Bride were by me united in marriage as authorized by a marriage.	of	Hend	County, State of	l
were by me united in marriage as authorized by a marriage as a marriage	age license issued for the	hat purpose by the Clerk of the Circu	uit Court of HEND	RICKS
Dated this day of day	19 8\	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Court of	

Official Designation.

Circuit Court

HENDRICKS

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

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

No. 213
File May 18, 1987

MALE Medical Examination Report Dated 5-18-87	FEMALE FEMALE
Name of Physician Michael Neelly	Medical Examination Report Dated 5-18-81
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoshall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a live
MALE APPLICANT	ance of a ficense to marry by any false statement, representation or pretense
Name Hirst Middle Last	Name FEMALE APPLICANT
Date of Birth Day Year	Promoto Middle 11 Last
H-26-48 Place of Birth (State or foreign country)	Date of Birth Month Day Year
Indianapolis, Indiana	Place of Birth (State or foreign country)
Residence Address 1 Street or R. R. City County State And State And State	Residence Address
Previous Marital Status: Never Married OR	6320 N 550 E., Brownstura Hend. In
Previous Marital Status. Never Married = OR Last Marriage Ended By: Death Divorce Annulment Divorce	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of officer version and officer participation of the participation o	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes U	outer (openly)
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No ✓ Yes ☐ If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? No ves 5. Are you now under the influence of a narcotic drug? No ves	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
Bryanna Finn West	Stephen Scott Hopkins
Durrett alle allet	James Dennis Gordon TI
Brett Matthew West	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No 🗆 Yes 🔍	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father UVQU WEST	compliance with any court order or orders issued for their support.
depended	8. Full name of father Charles J. Office
Residence of father (if deceased so state)	Residence of father (if deceased so state) Evansirile, In
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Indiana
9. Full maiden name of mother Tuna Othel Smith	9. Full maiden name of mother Sarah Juanila Walker
Residence of mother (if deceased so state) Indiana policy In	Residence of mother (if deceased so state) Evansurlle, In
Wentich.	\ hadia a
Birthplace of mother (State or foreign country) State of Indiana.	State of Indiana. State of Indiana. I depose and state the information given
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct.
XX : / (let)	V Brenda Stardon
Signed 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Signed. A.
New Address	New Address
Subscribed and sworn to before me this day of 1100	Subscribed and sworn to before me this day of 11 1001.
Mary Jane Russell Clerk HENDRICKS Circuit Court	Mary Gane Russell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS } ss:
County of HENDRICKS ss:	County ofFather
Signed	Signed
SignedMother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
Clerk	Clerk
Vieta	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 assument and filed
In 1 1: mosta the issuance of	1 a mail and
DETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court se issued by the clerk of the 19. Hendricks Circuit Court to be in the point of the second and wife
Be It Remembered there was filed in my office a marriage licen	se issued by the clerk of the
Be It Remembered, there was filed in my office a marriage licen of Indiana dated the 22 Md day of a	19. A.f., authorizing the forming together
a a	nd bonds sie
Be it further remembered, the following marriage certificate was filed in my o	nd
General De Strang	at Proundling, County of The
one thousand	County State of
of Indiana, Groom	County, State 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	cinui par poor s
County. Dated this	Signed Signed States
Dated this 23 day of May, 1981	Official Designation , 19 %
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation , 19 Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Many Links Clerk
accordance were the tang of	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

... Circuit Court

HENDRICKS

Health under Authority	MARRIAGE LICENSE S County Date of Application
of I.C. 31-1-3-2 Effective July 1, 1977	FFFFFFFF
- I S	FEMALE Medical Examination Report Dated S-15-8
MALE 5-15-8	
Medical Examination Report Dated	Name of Physician
Name of Physician Name of Physician Name of Physician Whose of Physician Answers of Physician (Physician Physician (Physician Physician Physici	ever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
shall be fined in any sum not exercise	Alda .
MALE APPLICANT Middle Last	Name Patricia hurch
Name Wind Year Year	Date of Birth Month
Date of Birth Month Day	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Spencer (a) Show Court
accounty City County State	Residence Address Well Ar. Bourg Kend. Ind
Residence Address Street or R. R. Ligger Mand. Sund.	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married □ OR	Previous Marital Status.
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of office the state of the
Other (Specify) Criver License upicture	Other (Specify) Drivers License y picture
	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed? No Yes
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease? No Tyes
2. Are you afflicted with a transmissible disease? No	3. Are you related to the male applicant closer than second cousin? No Ves
3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	The state of the s
	arthony Frederick Church
	7. Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any count order or orders issued for their support.
8. Full name of father Palphal. House	8. Full name of father Critical Control of the Cont
Residence of father (if deceased so state) Septon and	Residence of father (if deceased so state)
the state of the s	Birthplace of father (State or foreign country) Spencer Co.
Birthplace of father (State or foreign gountry)	Markey Protes
9. Full maiden name of mother State William Fuck	9. Full maiden name of mother
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Booke W. Snd.	Birthplace of mother (State or foreign country) Spencer CO State
State of Indiana, LENDRICKS As: I depose and state the information given	State of Indiana, HENDRICKS I depose and state the information gives in this application is true and corre
County of HENDRICKS in this application is true and correct.	County of HENDRICKS in this application is true and corre
Signed X WY X	Signed / fatricia / Church
New Address 2 WEIL DR BYBURG INC	New Address 3 Wail Drive Brownsburg
Subscribed and sworn to before me this day of OUL 190	18 Sylpil is
Mary and Russelland HENDRICKS	Subscribed and sworn to before me this day of 19.
Circuit Court	Jary Jan Gladel HENDRICKS Circuit Co
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one par
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.	
County of HENDRICKS ss:	State of Indiana,
	County of HENDRICKS ss:
SignedFather	Signed Fat
Signed	Signed Mot
Subscribed and sworn to before me thisday of	Signed
	Subscribed and sworn to before me thisday of, 19
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COL	RT. A marriage license having been refused to the above named parties,
authorizes and directs the issuance	e of a marriage license to the above named parties.
of Indiana dated the day of	SE AND MARRIAGE CERTIFICATE
of Indiana dated the day of The	ense issued by the clerk of the HENDRICKS Circuit Co
one thousand nine harded 1 7	hereby certify that on the
State of Indiana Comment of the	mile the state of
and Bride Ratricia Toh	at lat Rophist Church Liston, County of Herdricks of Herdricks County, State of To
were by me united in manifest	County of County of County of County of County, State of
County.	County, State of
Dated this day of June , 195	HENDRICKS HENDRICKS
, 19	
Filed and recorded in annual	Official Designation of Paymond L. Rader
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Postor
7,000	day of July

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

MALE Medical Examination Report Dates 5-9-81	FEMALE Date of Application		
Name of Physician Stegemolles			
Name of Physician	Medical Examination Report Dated 5-9-8		
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed False statement—Wi-	Name of Physician Stepemoller ver procures the issuance of a license to marry by any false statement, representation or pretense		
MALE APPLICANT	Il		
Name Middle Clast	Name FEMALE APPLICANT		
Date of Birth Month Day Year,	Middle A		
Place of Birth (State of foreign country)	Date of Birth Month Bay Lost		
Residence Address O Sycet of RR. City	Place of Birth (State or Coreign country)		
204 S. Indiana Danuelle Idend State 1	Residence Address (Street or Brute, Snot-		
Previous Marital Status Never Married OR	SS9 Mackey RI City My M County Spate		
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR		
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Asset D		
Other (Specify) Drues Science Wpicture	Date of birth verified by: Birth Certificate Judicial Decree		
the same of the sa	Other(Specify)		
Manager is "yes" has the adjustication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No 2 Yes		
2 Are you afflicted with a transmissible disease? No Ves C	If answer is "yes", has the adjudication been and the		
3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease?		
4. Are you now under the influence of intoxicating liquor? No Wes D	3. Are you related to the male applicant closer than second cousin?		
5. Are you now under the influence of a narcotic drug? No W Yes O	*. Are you now under the influence of intoxicating liquor?		
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes No Yes		
	6. List the full names of any dependent children.		
7. Are you required by any court order or orders to support the above			
dependent children'	7. Are you required by any court order or orders to support the above dependent children?		
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	No □ Yes □		
8. Full name of father Current or prefers insigned for their support	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order properties issued for their support.		
Distriction of the second	8. Full name of father William Frank Robbia.		
Residence of father of deceased so state). Rockwille, and.	Residence of father (if deceased so state) Residence of father (if deceased so state)		
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Duris Dunois		
9. Full maiden name of mother Schaldine May			
Residence of mother (if decreased so state) Rockielle, and.	9. Full maiden name of mother Carolyn Jano Nexon		
0	Residence of mother (if deceased so state)		
Birthplace of mother (State or foreign country) State of Indiana.	Birthplace of mother (State or foreign country) Aymora, and.		
County of HENDRICKS as: 1 depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS I depose and state the information given in this application is true and asset		
VO I D. Q.	County of HEINDRICKS in this application is true and correct.		
Signed yames a Detay	Signed X Ulmessa S. Jobba		
New Address Det S. Dwd. St. Daniello, and	New Address 204 S. Indiana St., Danville In		
Subscribed and sworn by before me this day of 7 loup, 1981.	Subscribed and sworn to before me this 8 day of Mouy 1981		
Thory are Guscellark HENDRICKS Circuit Court	Mary Comp Pills 00 HENDRICKS		
, and the state of	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 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	signs, state facts which render the consent of the other parent unnecessary		
State of Indiana. County of HENDRICKS as:	State of Indiana, HENDRICKS } ss:		
County of HENDRICKS	County of		
Signed	SignedFather		
Signed Mother	Signed		
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of, 19,		
	Clerk		
Clerk			
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	A marriage license having been refused to the above named parties, the		
HENDRICKS County Cour	t by written order issuedand nied		
authorizes and directs the issuance of	a marriage license to the above named parties.		
RETURN OF MARRIAGE LICENSE			
Be It Remembered, there was filed in my office a marriage license	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court issued by the clerk of the		
Indiana dated the 23 day of May	authorizing the Joining together to havoure and to je		
	10 HEARD WATER		
e it further remembered, the following marriage certificate was filed in my offic	t white that on the		
e though the her	eby certify that on the 23 day of County of Hendricks,		
at	Hondrick County, State of Ind		
ate of Indiana, Groom			
ere by me united in marriage as authorized by a marriage license issued for that	HENDRICKS HENDRICKS		
ere by me united in marriage as authorized by a marriage license issued for tha	t purpose by the Citin vy the		
ated this 33 day of Many, 1981.	e a l for harm		
day of			
	icial Designation		
iled and recorded in accordance with the laws of the State of Indiana this	Clerk Clerk		
	gned HENDRICKS Circuit Court		

APPLICATION FOR MARRIAGE LICENSE

5-9.81 Date of Application

HENDRICKS

... Circuit Court

Form Prescribed By Indiana State Board of APPLICATION FOR	MARRIAGE LICENSE File
Health under Authority of I.C. 31-1-3-2 HENDRIC	VS CONTRACTOR OF THE CONTRACTO
Effective July 1, 1977	that of Application
	FEMALE Medical Examination Report Dated 5-18-81
MALE Medical Examination Report Dated 5-18-8	The state of the s
	Name of Physician
Name of Physician Victorian Victoria	oever procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED. I.C. of Florida (\$500,00)", shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Pirgo Middle I Lasy
Name First Middle Bales	Date of Birth Month Day Year
Date of Birth Month Day	Place of Birth (State or) foreign country
Place of Birth (State or foreign country)	Coalisvelli Smer.
Residence Address / Street or R. R. City County State	Residence Address Clinton Danville Head. Ind
140 E Clurton Battered Take.	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree
Date of birth verified by:	Drivers dicense penture
Other (Specify)	1 Are you now or have you ever been adjudged to be of unsound mind? No 8 Yes 0
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed. No Yea
If answer is "yes", has the adjudication been removed:	2 Are you afflicted with a transmissible disease" No Pygo
2. Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin? No □ Yes □	3. Are you related to the male applicant closer than second cousin' No Yes O
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intuxicating liquor? No. 1 yes 0
5. Are you now under the influence of a narcotic drug? No ♥ Yes □	5. Are you now under the influence of a narcotic drug? No Yes O
6. List the full names of any dependent children.	6 List the full names of any dependent children.
	Chadrick Nukay smeth
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No Yes
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court-order or orders issued for their support.	compliance with any coursepper or orders assued for their support
8. Full name of father Gary W. Bales	8. Full name of father Charles V. By Smith
Residence of father (if deceased so state) Wartingwell and,	Residence of father (if deceased so state) Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Suchple Joy
9. Full maiden name of mother Janice L. Quinton	9 Full maiden name of mother Denada C. Celleson
Martinill hel	Do will lad
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana,	Birthplace of mother (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.	County of HENDRICKS in this application is true and correct.
Signed & Bush D. Bales	x storage a & the
New Address MO E- Clipton Danville	Signed CO CO to Committee
Subscribed and swarn to before me this 19 day of 198	New Address / 10
Mary Jane Russell Gerk HENDRICKS	Subscribed and sworn to before me this
Clerk Circuit Court	11 Ward Jane Russel HerbRicks Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF BAREVES BARRYES BARRYES
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
	The state of the s
State of Indiana, County of HENDRICKS 88:	State of Indiana,
,	County of HENDRICKS
Signed	Signed Father
Signed Mother	Signed Mother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this day of 19
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 ourt by written order issued 3 - Our wave and filed
in Clarks Office authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE	purt by written order issued 3 - Olan waves and filed
DETURN OF THE	a marriage license to the above named parties.
18P III Kemembered 11	DE AND MADDIAGE CERTIFICATION
of Indiana dated the day of day of	nse issued by the clerk of the HENDRICKS Circuit Court and Described and wife and Described Court of the pointing together as husband and wife office, to-wit:
Be it further remembered, the following	and authorizing the joining together as husband and wife
I, Son one certificate was filed in my	office, to-wit:
one thousand nine hundred and State of Indiana, Groom	hereby certify that on the 23
State of Indiana, Groom Brien Bolos	at Danvella any of 100 Hard
and, Bride DeLanno A. Smith	of Head County State of Did
(Olimfa)	County State of
Dated this 23 day of May 198	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19.	
Filed and many 1.1	Signal
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister
, statuta this	21

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

HENDRICKS

.. Circuit Court

MALE Medical Examination Report Dated 5-15-81	FEMALE Date of Application
Name of Physician Stuart J. Burns	Medical Evansing to
Name of Tayout St. RE ANSWERED 10 20122	Name of Physician
shall be fined in any sum not exceeding five hundred dollars (8500,00)"	Name of Physician Stuart J. Burns oever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	ance of a license to marry by any false statement, representation or pretense
Name Michael & Middle Quant	FEMALE APPLICANT
Date of Birth June 28	Middle D Last
Place of Birth (State or foreign country)	Date of Birth Month Day
Residence Address Street or R. City County	Place of Birth (State or loreign country)
RRIBX 455, Plainfield Indian	Residence Address Street or R. R. Sity County State
Previous Marital Status: Never Married OR	The thankeld by diana
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Other(Specify)	Dirth Certificate U Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D	Other(Specify)
If answer is "yes", has the adjudication been removed? No D Yes D	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes O	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes O Are you now under the influence of intexicating liquor?	3. Are you related to the
7 tes 0	4. Are you now under the influence of intoxicating liquor?
Are you now under the influence of a narcotic drug? No Yes No Yes No Yes	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children" No D Yes D	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support
8. Full name of father through the seel	8. Full name of father William C. Farks
Residence of father (if decreased so state) Flainfield, Ind.	Residence of father (if deceased so state) Plainfield S.O.
Birthplace of father i State or foreign country). Clabon	Birthplace of father (State or foreign country). Indiana
9. Full maiden name of mother I rances Lac Sehman	9. Full maiden name of mother Maxine E. Keltner
Residence of mother (if decreased so state). Plainfield, Sid.	Residence of mother (if deceased so state) Alclased
Birthplace of mother i State or foreign country Jennesole	Birthplace of mother (State or foreign country) Island
State of Indiana. County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana
County of HENDRICKS sa: in this application is true and correct.	County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
Signed Mike Russell	Signed Caula Parks
New Address 154 Chisom OR LANTERN HILLS	New Address 154 Chippone Dr. Janten Hill
Subscribed and sworn to before me this 19 day of May 1981.	Subscribed and sworn to before me this 19 day of May 1981
Mary Jane Russell Gerk HENDRICKS Gircuit Court	Man Jane Dussell Glerk HENDRICKS Circuit Court
	41
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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana.	State of Indiana.
County of HENDRICKS ss:	County of
	Signed
Signed	Signed
Signed Mother	Subscribed and sworn to before me this
Subscribed and sworn to before me this day of	Subscribed and sworn to before the difference of the control of th
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
	HPT DV WILLEH OLGEN JOHN
authorizes and directs the issuance of	f a marriage license to the above hame
convige	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the the joining together as husband and wife
Indiana dated the day of	19 Ch, authorizing the joining together to have
	10
Be it further remembered, the following marriage certificate was filed in my of	ereby certify that on the 33 day of
me thousand nine hundred and State of Indian	a Moresvelle Country of The of
ne thousand nine hundred and state of Indiana, Groom Section of Residual Conditions of the Residual Co	County, State of
Indiana terram	County State of
ere by me unital :	hat purpose by the
ounty.	11 - Les Levis
Pated this 33 day of Mary 1981	Signed Harry Lea Lewis
9	T. I.D. Jangtion

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

APPLICATION FOR MARRIAGE LICENSE

Health under Authority	PLICATION FOR M	MARRIAGE LICENSE SCounty	5-19-81 Date of Application
Effective July 1, 1977	2-81	FEMALE Medical Examination Report Dated	5-12-81
MALE Medical Examination Report Dated Source Source Male	+-01	Name of Physician Jany). Lovall
Name of Physician Journal ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 pr	"False statement - Whoe	ver procures the issuance of a license to marre by an	y false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED. I.C. of the shall be fined in any sum not exceeding five hundred dollars	(8500,00)".	FEMALE AP	PLICANT Middle
MALE APPLICANT	Last	Name Ochure Ko	Lucy Electrille
Date of Birth Month Day	th Nanchar	Date of Birth Month	5 1961
Place of Birth (State or foreign country)	1901	Place of Birth (State or foreign country)	City County State
Residence Address Street d.R. R. City	County State	Residence Address Street or R. R.	Saville, Ind.
Previous Marital Status: Never Married OR		Previous Marital Status Never Marries OR Last Marriage Ended By Death Divorce Ann	nulment D
Lest Marriage Ended By: Death Divorce Annulment		Date of birth verified by Birth Certificate Ju	dicial Decree
Date of birth verified by: Birth Certificate Judicial Decree		Other (Specify) School &	Geord
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes □	1. Are you now or have you ever been adjudged to be of	d unsound mind? No Yes D
If answer is "yes", has the adjudication been removed?	No□ Yes□	If answer is "yes", has the adjudication been removed 2. Are you afflicted with a transmissible disease"	No Ves D
 Are you afflicted with a transmissible disease? Are you related to the female applicant closer than second cousin? 	No Yes □	3. Are you related to the male applicant closer than see	
4. Are you now under the influence of intoxicating liquor?	No Yes O	Are you now under the influence of intoxicating liquid Are you now under the influence of a narcotic drug*	
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.	No. Tes	6 List the full names of any dependent children	
		7 Are you required by any court order or orders to su	pport the above
7. Are you required by any court order or orders to support the above dependent children?	No□ Yes□	dependent children? If answer is "yes", it is required that this Application	No U Yes U
If answer is "yes", it is required that this Application be accompanied compliance with any court order or orders issued for their support.	by satisfactory proof that you are in	compliance with any court order or orders issued for	
8. Full name of father Robert A - Nov	chas	8 Full name of father	Drive Cheroville
Residence of father (if deceased so state)	e dod!	Residence of father (if deceased so state)	l'ilania
Birthplace of father (State or foreign country) 9. Full maiden name of mother	ex.	Birthplace of father (State or foreign country)	B. Young
Residence of mother (if deceased so state)	e Ind.	Residence of mother (if deceased so state)	Inviele In.
Birthplace of mother (State or foreign country)	ana	Birthplace of mother (State or foreign country)	5. Detota
State of Indiana, County of HENDRICKS State of Indiana, In depose as in this ap	nd state the information given	State of Indiana. County of HENDRICKS	I depose and state the information given in this application is true and correct.
signed sheatfach	1	Signed Oabbie K	an Ebusille
New Address 3850 East Wine	Drive Sidian apolis 1	V. New Address 3850 (ngy DA Programme
Subscribed and sworn to before me this day of	May , 1981	Subscribed and aworn to before this	of May 19.81
De Russell Gerk	HENDRICKS Circuit Court	I lany fine Kussel	Clerk HENDRICKS Seleuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GUAR	RDIAN
We, the parents, of this applicant hereby give consent for this		We, the parents, of this applicant hereby give of	consent for this marriage. If only one parent
signs, state facts which render the consent of the other parer	it unnecessary	signs, state facts which render the consent of t	he other parent unnecessary
			The state of the s
		00	The second secon
State of Indiana, County of HENDRICKS ss:		State of Indiana.	
Signed	Father	County of HENDRICKS	T. Maria
Signed	Mother	Signed Signed	Father
Subscribed and sworn to before me thisday of		Subscribed and sworn to before me this	day of
	Clerk	***************************************	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED HENDRICKS County	D BY ORDER OF COUL	RT A marriage license having been refus	sed to the above named parties, the
in Clerk Object authoriz	ces and directs the issue	ourt by written order issued.	and filed
RETURN	OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE	arties.
of Indiana dated the	Man age nee	nse issued by the clerk of the	ENDRICKS Circuit Court
Be it further remembered, the following marriage	"Jank	and Dally, authorizing the jo	pining together as husband and wife
one thousand nine hundred and	certificate was filed in my	and Sololie K Elector	
one thousand nine hundred and State of Indiana, Groom		at Daniele	day of May
and, Bride.	Handler	of Hend	County of Seed
Country me united in marriage as authorized by a	marriage license issued	Cou	inty, State of Ind.
Dated this day of day	To the same of the	\ pur pose by the Clerk of the Circuit Co	ourt of HENDRICKS
		Signed	and Brists and
Filed and recorded in accordance with the laws of	the State of Indiana this	Official Designation	
		Signed Signed Signed	19
		The same of the same	HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICE

No. 219

A A OO O HENDRICKS

.Clerk

.Circuit Court

of I.C. 31 The HENDRICK	S File
MALE 5-Q 9	
Medical Examination Report Dated 5-9-8	FEMALE Date of Application
Name of Physician J. Showas Cherica	Medical Examination Report Dated 5-9-81
	Name of Physician Shomas Vierra
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whoshall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement
MALE APPLICANT Pirst Middle	
Name Konalal & Miss	Name First Middle
Date of Birth Month Day Year	Date of Birth Month Stennon
Place of Birth (State or foreign country)	Place of Birth (State or topeign country) Day Year 1963
Residence Address Street of R. R. City County State Nonzovia Maring in State	Residence All a Secreta And
the gen one.	Street or R. R. City, 10 County State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Uddicial Decree
Other (Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐ If answer is "yes", has the adjudication been removed? No ☐ Yes ☐	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No D yes D	2. Are you afflicted with a transmissible disease? No Yes No Ye
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No Yes No Yes	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father William William Community	8. Full name of father Hangford G. Stinkon
Residence of father (if deceased so state)	Residence of father (if deceased so state) Putnam Co. Incl. CMt. Merco
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Urgenta
9. Full maiden name of mother / argaret Unn Ungerson	9. Full maiden name of mother Phyllis M. M. Cormick
Residence of mother (if deceased so state) Myrova Sed.	Residence of mother (if deceased so state) Costinuylle Sul Henel, Co.)
Birthplace of mother State or foreign country Indiana	Birthplace of mother (State or foreign country) Indiana
State of Indiana, HENDRICKS Ba: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
County of	County of
Signed & Ronald Lays	Signed Lat Duna Sunon
New Address RR 1 BOX 36	New Address HAI DON 361
Subscribed and sworn to before me this day of 19.0.	Subscribed and sworn to before me this day of Word 1981
Mary Some Please Of Gerk HENDRICKS Circuit Court	Mary Jane Russall Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS ss:	
Signed Father	Signed Mother
Signed Mother	Signed
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
TILINDRICK CO	art hy written order issued
in County directs the issuance of	f a marriage license to the above named parties.
conver	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
of Indiana data to	10
D. Araba & Ca.	na
l,	pereby certify that on the and day of
one thousand nine hundred and State of Indiana C	County State of
State of Indiana, Groom and State of Indiana, Groom and, Bride of	County, State of HENDRICKS Hat purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for to	hat purpose by the Clerk of the Circuit Court of
County.	M Son a Russell

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

APPLICATION FOR MARRIAGE LICENSE

A A OO Q HENDRICKS

..Clerk

... Circuit Court

HENDRICK HENDRICK	(S File
MALE 5-Q 9	County
Medical Examination Report Dated 5-9-8	FEMALE Date of Application
Name of Physician & Shomos Werra	Medical Examination Report Dated 5-9-81
LL QUESTIONS MUST BE ASSAURED TO 31-1-3-6 prescribed "False statement—Who	ever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	distance of a ficense to marry by any false statement, representation or pretense
ame Middle Aast	Name FEMALE APPLICANT
Month Pay	Name Crist Middle O. Last
XX Int.	Date of Birth Month Day Stenson
ace of Birth (State or foreign country)	Place of Birth (State or foreign country) Year 1963
esidence Address Street of R. R. City County	
RRI BOX367 Monrous Morgan Ind.	City, County State
revious Marital Status: Never Married OR	Coalesculle Hend. Incl.
ast Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
ate of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other(Specify)
Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you are be to the time to the t
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No Yes No Yes
Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes D
Are you related to the female applicant closer than second cousin? No Ves Are you now under the influence of intoxicating liquor? No Ves	3. Are you related to the male applicant closer than second cousin?
	4. Are you now under the influence of intoxicating liquor?
Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
List the can have been a second to the secon	6. List the full names of any dependent children.
	THE RESERVE OF THE PARTY OF THE
Are you required by any court order or orders to support the above	
dependent children? No□ Yes□	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any coury order or orders issued for their support.
Full name of father Vonakol R. Haip	8. Full name of father Nansford G. Stinson
Residence of father (if deceased so state) // Oprovidents	Residence of father (if deceased so state) Putnam & . Incl. CMt. Merci
Birthplace of father (State or foreign country) Incliana	Minisia
Margaret aux Ruders	Birthplace of father (State or foreign country) Phyllis M. M. Cornick
Full maiden name of mother / wygret with angers on	9. Full maiden name of mother Vicycles 111, 111 Counties.
Residence of mother (if dece	
Birthplace of mother (State	
ate of Indiana.	
ounty of HENDRI	, hereby give my consent for
I, Phyllix m Cus	, her coy give my
1 1/10 17 80 1000	marlene Stensing to
New Add	
bscribed and sworn to be marry Ponald Rays	
Mary &	
NSENT OF PARENTS.	
the parents, of this at	efore me this 11 day of May 1981
s. the parents, of this ar in Subscribed and sworn to be set to state facts which retains state facts which retains the same of the parents, of this ar in the parents, of this architecture is the parents of the	store me onis
os state facts which ref	的。 第一章
	C. M. apriles
	Not any Public 912911
StateofInd	House
	Hend.
te of Indiana,	County of
my of	Father
Signed Father	Signed
Signed Mother	Signed
	Subscribed and sworn to before me this
escribed and sworn to before me this day of	Clerk
Clerk	the base remed parties the
MPLETE IE MARRIAGE MONTH TO THE PLANT OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS HENDRICKS	T. A marriage license having been recommended and filed urt by written order issued
County County Livesty the issuance 0	f a marriage license to the above named parties.
	A AND MARRIAGE CERTIFICATION CONTRACTOR CONT
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court se issued by the clerk of the
1860 At Downstand II am and office a marraye the	together as nusoana and wife
Indiana dated the Aday of 11/02	La Donnas III Stinson
it further man and the Kang and a fled in my o	nd
it further remembered, the following marriage certificate was filed in my of	rereby certify that on the day of day of
thousand nine hundred and S	at Donnello , councy of Jad
te of I in hundred and	of County, State of County, State of HENDRICKS
the of Indiana, Groom Small Kay	Handroke County, State of HENDRICKS
Bride Jalana M Straw of	County, State of State of HENDRICKS that purpose by the Clerk of the Circuit Court of
to by me united in marriage as authorized by a marriage license issued for	the back
ted this II day of May, 1981	Signed Mary and Co
day of	Official Designation 1981.
	1.10

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

5-19-81 Date of Application

... Circuit Court

MALE / // X /	Medical Examination Report Dated 5-13-81
MALE Medical Examination Report Dated	N
(Y (s And des)	Name of Physician , The Melotein
Name of Physician Expression 16, 211, 26 prescribed "False statement—Who	never procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-13-6 ptcscript fits any sum not exceeding five hundred dollars (8500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Offirst O Middle . Lest
Name / First Middle Last	Sheryl Nenise Gilbert
Date of Birth Month Day (Year)	Date of Birth Month Day Year
Date of Birth Month	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Lubbock Dyas
Residence Address Street or R. R. City County State	Residence Address Street or R. R. R. Pittsboro Rend State
I dast Calling Drawnshurg In.	- Chel.
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Divorce Divorc
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by:
	De Other (Specify) School Record
Other (Specify) No W Yes O	Are you now or have you ever been adjudged to be of unsound mind? No Yes Yes
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed.	
2. Are you afflicted with a transmissible disease?	
3. Are you related to the female applicant closer than second cousin?	
4. Are you now under the influence of intoxicating liquor? No Yes Very new under the influence of a parcetic drug?	
5. Are you now under the influence of a narcotic drug?	
6. List the full names of any dependent children.	6. List the full names of any dependent children.
101 Taranta La Transaction Contraction Con	
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children? No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support	compliance with any court prider or orders issued for their support.
8. Full name of father The Mark	8. Full name of father Richard B. Gilbert
Roman	Dittehan Dad
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) CL TOOO, Department
9. Full maiden name of mother Julia Druce	9. Full maiden name of mother Vergie Brodecko
Britan de de la Britania de la Companya de la Compa	D. Holass O. I
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Deming New Medico
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana.
County of TENDRICKS in this application is true and correct.	County of HENDRICKS BR: in this application is true and correct.
Signed Kanny & Sharp	Signed Shell Gillet
New Address NAS CECIL FIELD	Signed Augustian Analysis
	New Address Thull au fation-garboon
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this day of 1901.
	Subscribed and sworn to before me this day of the subscribed and sworn to before me this
Theres are Kingly HENDRICKS	Mary & Disage M HENDRICKS
The and I did the	Mary Janubuse Herk HENDRICKS Circuit Court
Theres are Kingly HENDRICKS	Mary Janubussellerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	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 parent	Mary Janubussellerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	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 parent	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
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CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
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,	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana,
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CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary 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 parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Applicated By Marriage Hendricks Father
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Application Signed Application Signed Application Signed Application Signed Application 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. State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Signed Mother Subscribed and sworn to before me this day of Clerk
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS ss: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF 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 day of 19
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Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS }ss: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Co	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 T. A marriage license having been refused to the above named parties, the curt by written order issued and filed fa marriage license to the above named parties. E AND MARRIAGE CERTIFICATE
Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Consumption authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI STEPPING Americage licen of Indiana dated the semiconduction of the other parent unnecessary. State of Indiana, HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Consumption authorizes and directs the issuance of Indiana dated the semiconduction of the semiconduc	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 day of 19 Clerk T. A marriage license having been refused to the above named parties, the curt by written order issued and filed fa marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Se issued by the clerk of the state of t
Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI of Indiana dated the day of Marriage licen	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 May of Father Subscribed and sworn to before me this day of 19 Clerk T. A marriage license having been refused to the above named parties, the curt by written order issued and filed fa marriage license to the above named parties. E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court 19 Authorizing the joining together as husband and wife
Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI of Indiana dated the day of Marriage licen	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 May of Father Subscribed and sworn to before me this day of 19 Clerk T. A marriage license having been refused to the above named parties, the curt by written order issued and filed fa marriage license to the above named parties. E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court 19 Authorizing the joining together as husband and wife
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CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 day of 19. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS in authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI of Indiana dated the day of Marriage certificate was filed in my office a marriage licen day of Marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom and, Bride Marriage as authorized by a marriage licen of Of County of Marriage as authorized by a marriage licen of Of County of Marriage as authorized by a marriage licen of Of County of Marriage as authorized by a marriage licen of Of County of Of Of CONSTRUCTION OF MARRIAGE LICENSI and Of Of Of ORDITAL OF MARRIAGE LICENSI AND OF	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 HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed Hendricky 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 urt by written order issued and filed f a marriage license to the above named parties. E. AND MARRIAGE CERTIFICATE See issued by the clerk of the HENDRICKS Circuit Court 19. A authorizing the joining together as husband and wife fice, to-wit: hereby certify that on the day of County, State of County State of County, State of County
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CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS in authorizes and directs the issuance of the consent of the other parent unnecessary. RETURN OF MARRIAGE LICENSI ISSUED BY ORDER OF COURT HENDRICKS County County There was filed in my office a marriage licen of Indiana dated the day of MARRIAGE LICENSI Desired in my office a marriage licen one thousand nine hundred and State of Indiana, Groom and, Bride Marriage as authorized by a marriage license issued for County. Dated this day of 19 Marriage license issued for the county. Dated this day of 19 Marriage license issued for the county. Dated this day of 19 Marriage license issued for the county. Dated this day of 19 Marriage license issued for the county.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 T. A marriage license having been refused to the above named parties, the urt by written order issued and filed fa marriage license to the above named parties. E. AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court 19 19 20 21 22 23 24 25 26 26 26 26 26 26 26 26 26
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby 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 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS in authorizes and directs the issuance of the was filed in my office a marriage licene of Indiana dated the day of Marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom and, Bride Marriage as authorized by a marriage license issued for County, Dated this day of 19 Consense of Indiana, Groom and Bride Marriage as authorized by a marriage license issued for County, Dated this day of 19	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed HENDRICKS Clerk T. A marriage license having been refused to the above named parties, the urt by written order issued and filed fa marriage license to the above named parties. E. AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court 19 19 20 21 22 23 24 25 26 26 26 26 26 26 26 26 26
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Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 221

Effective July 1. 1970	Count
MALE Medical Examination Report Dated 5-18-81	Date of Application
0 00	FEMALE
Name of Physician C. Clark	Medical Examination Report Dated S-18-81 Name of Physician C C C C C C C C C C C C C C C C C C C
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician & Clark
MALE APPLICANT	If
Name Brat & Middle L. Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	Middle 11 Inst
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address Street or R. R. Ogey County State,	Place of Birth (State or)foreign country)
598 spring out. Hend Ind.	Residence Address Street or R. R. Que City County State
Previous Marital Status. Never Married OR Lot Marriage Ended By Death Divorce Annulment O	Previous Marital Status: Never Married OR
Last Marriage Ended By Death Divorce Annulment Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
1 Other (Specify) britters decense of picture	Other (Specify) Drivers Leceings uppicture
1. Are you now or have you ever been adjudged to be of unsound mind? No Wes If answer is "yes" has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes" has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes No Yes No Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No 2 yes 0	2. Are you afflicted with a transmissible disease? No Yes 3. Are you related to the male applicant elevanth.
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No P Yes D	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes
Are you now under the influence of a narcotic drug? No Yes No Yes No Yes	5. Are you now under the influence of a narcotic drug?
matthew Clay Welliams	6. List the full names of any dependent children.
Michael alan Wholen	Muchael Daviel Hendricks
	Bruce Les Hendricks
7. Are you required by any court order or orders to support the above	
dependent children? No□ Yes 🖰	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders, issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Ita Welliams	compliance with any courrorder or orders issued for their support. 8. Full name of father ONNU GUSON
Residence of father (if deceased so state) Grancastle Ind.	Residence of father (if deceased so state) Indo
Birthplace of father (State or foreign country) Breenwille S. Carolina	Birthplace of father (State or foreign country) Nobles wille And.
9. Full masden name of mother Eula Me Dyav	9. Full maiden name of mother Inles Mae Sownsend
Residence of mother (if decreased so state) Cloudrolale Ind.	Mati in a
Birthplace of mother (State of foreign country) Hartwell Georgia	Residence of mother (if deceased so state) Martaneville
State of Indiana.	State of Indiana, HENDRICKS Birthplace of mother (State or foreign country) State of Indiana, in this application is true and correct.
County of HENDRICKS sa: in this application is true and correct.	County of HENDRICKS ss: I depose and state the inhabitor given in this application is true and correct.
Signed / Kobut C- Welliams	Signed Jauline L. Henducks
New Address SAME as about	New Address. Same
Subscribed and sworn to before me this Q day of W Quy 19 M.	Subscribed and sworn to before me this. A day of 19.80
Wary and tubbe Wark HENDRICKS Circuit Court	Mary Jane Pessellerk HENDRICKS Circuit Court
COVERNS OF THE PARTY OF THE PAR	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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts
See at a	State of Indiana.
State of Indiana, County of HENDRICKS sa:	State of Indiana, HENDRICKS County of
	SignedFather
V-11-	SignedMother
SIE 184	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of, 19	Clerk
	license having heen refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been local traction and filed urt by written order issued
in Clark Office County authorizes and directs the issuance of	
	A LAND MADDIAGE CERTIFICATE LIENDOCKS
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
of Indiana dated the day of	P C. J. Hendrede
Be it treth Robert & Wolseans and fled in my o	nd ffice, to-wit:
of a further remembered, the following marriage certificate was filed in my	day of
thousand nine hundred	County, State of
The of Indiana	Country State of Control of Contr
State of Indiana, Groom Color to the Indiana, Groom	HENDRICKS HENDRICKS
and, Bride	
Dated this day of and 1981	Signed Signed
day of	Official Designation ,1951
Filed and recorded in accordance with the laws of the State of Indiana this	aday of Clerk
recorded in accordance with the laws of the State of Indiana State	Signed HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

Effective July 1, 1977	- Application
	FEMALE Medical Examination Report Dated 5-12-81
MALE Makes Framination Report Dated 5-12-81	
Medical Examination	Name of Physician Victorial
Name of Physician Statement - Wi	noever procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed Tals and State of the State	noever procures the issuance of a license to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding the MALE APPLICANT	Name Fifs / Middle (bast
Name First Middle Perdue	Nepra & Hoart
Halled Year	Date of Birth 3 21 1962
12 27 170 1	Place of Birth (State or foreign country)
Place of Birth (State or foreign country) State County State	Residence Address Street or R. R. City County State
Residence Address Street or R. R.	1282 andrews Dr. Pefol Send Ind
3825 E Wash Sneyes Marine Site.	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married O OR	Last Marriage Ended By: Death Divorce Annulment Divorce
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Undicial Decree
Date of birth verified by:	
Other (Specify)	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes	If answer is "yes", has the adjudication been removed? No Yes O
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease? No ₹ Yes □
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No ♥ Yes□
3. Are you related to the female applicant closer than second cousin.	4. Are you now under the influence of intoxicating liquor? No Yes O
4. Are you now under the influence of intoxicating liquor? No D Yes D	5. Are you now under the influence of a narcotic drug? No F Yes C
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.	6. List the full names of any dependent children.
0. List the full halice of any september 1	Siffany Rool Roart
	NO P
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No Yes D
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Gladel A. Gerolia	8. Full name of father Narry Caleby Roark
Residence of father (if deceased so state) Putnamville Ind.	Residence of father (if deceased so state) The State of S
Birthplace of father (State or foreign country) Jennessel	Birthplace of father (State or foreign country) Indiana
A source of the state of the st	CM. Odied PAR Noger
5. Pull marten marie of model	9. Full maiden name of mother was a full for the first form of the full fo
Residence of mother (if deceased so state) Putnamuella Incl.	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Suddenda	Birthplace of mother (State or foreign country Sullane
State of Indiana, HENDRICKS Ss: I depose and state the information given this application is true and correct.	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
County of County	County of
Signed Signed Signed	Signed Debra L Roat
New Address Undlandfull	New Address Indianapolio
Subscribed and sworn to before me this day of May 198	Subscribed and sworn to before me this A day of May 1981
HENDRICKS	1 10 0 10 0 11 00 115 150000
Gircuit Court	HENDRICKS 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 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
of the other parent unnecessary.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed	Pathor
Signed	Signed
Subscribed and sworn to before me this	Signed Mother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY COMPLETE	
HENDRICKS County	T. A marriage license having been refused to the above named parties, the
and directs the issuance of	of a marriage license to the above named parties.
of Indiana dated the	use issued by the clerk of the HENDRICKS Circuit Court
0 0)	10 - hysband and wife
a the following marriage certificate and a	ind
one thousand nine hundred and	hereby certify that on theday of, at, County of,
State of Indiana, Groom	. County of
ana, Briae	County, State of
County, County	.of
Dated this	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated thisday of, 19	
	Signed
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
this	day of, 19

Signed....

..... Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

File_

MALE	Live Bay
MALE Medical Examination Report Dated 5-/4-8/	
Name of Physician WM Colwoods	
Name of Physician W	III Towners

_County

5-20-81 Date of Application

Name of Physician W M Columbia	FEMALE Medical Examination Report Dated 5-14-81
	Name of Physician W & Column ds
MALE APPLICANT	Il issuance of a license to marry by any false statement, representation or preter

ALL QUESTION of the statement of the sta	never procures the issuance of a license to marry by any false statement, representation or pretense
Name of smaled Middle Mar Last	Name First FEMALE APPLICANT
Date of Birth Morch Day Year	Date of Birth Month Last
Place of Birth (State or figreign country)	Day Yest
Noneset KU	Place of Birth (Styte or foreign country) 1962
Residence Address State Pol Downillo State	Residence Address Street or R. R.
Previous Marital Status Never Married OR	4/19 Contensland Pol Domillo And
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
1 Other (Specity) Drivers Lie W/Pie	Other (Specify) Drivers Lie W/ Ric
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes" has the adjudication been removed? No Ves C Are you afflicted with a transmissible disease? No Ves C	If answer is "yes", has the adjudication been removed?
	2. Are you afflicted with a transmissible disease? No Yes D
3. Are you related to the female applicant closer than second cousin? Now Yes 4. Are you now under the influence of intoxicating liquor? Now Yes Now Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes O	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	 5. Are you now under the influence of a narcotic drug? No Yes □ 6. List the full names of any dependent children.
	and the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes
compliance with any count order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court orders issued for their support.
8. Full name of father - Roger Sloyd Moron	8. Full name of father Yor Richard Harper
Residence of father (if decreased so state) Dowelle, And	Residence of father (if deceased so state) Donnielle, In
Birthplace of father (State or foreign country) Kay	1.1:
Datta Panesass	Birthplace of father (State or foreign country)
9. Full maiden name of mother	9. Full maiden name of mother Jowa Winela Hedden
Residence of mother (if decreased so state). Lewis, Ju	Residence of mother (if deceased so state) Danvillo, Lu
Birthplace of mother State or foreign country Ohio	Birthplace of mother (State or foreign country). Andies nec
State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Section 1 Section 2 Section 2 Section 2 Section 2 Section 2 Section 2 Section 3 Section 3
County of	County of
Signed Devald Moran	Signed nona Harper
New Address 419 Contessioning Rd Danville	New Address 4/9 Cartersburg Rd. Damill
Subscribed and sworn to before me thin 20 day of Muy . 198.	Subscribed and sworn to before me this day of day of 19.1.
Mary Chan M. WILL HENDRICKS	MASIL MAD DINNOCKS HENDRICKS Circuit Court
Thery Still Klerk HENDRICKS Circuit Court	- July 1
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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state racto
State of Indiana,	State of Indiana, HENDRICKS } ss:
County of HENDRICKS 881	County of HENDRICKS
E-ther	SignedFather
Signed	Signed
Signed Mother	Subscribed and sworn to before me thisday of, 19,
Subscribed and sworn to before me this	Subscribed and sworn to before me this
Clerk	
	RT. A marriage license having been refused to the above named parties, the and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	ourt by written order issued
HENDRICKS County County	of a marriage license to the above named parties.
n directs the issuance of	Of a marriag
THE PRINCE LICENS	SE AND MARKIAGE CUTT
Be It Remembered, there was filed in my office a marriage licen	nse issued by the terms authorizing the joining together as husband and wife
of Indiana dated the Add day of May	nse issued by the clerk of the
Seit TERAL P. Words	office, to-wit:
u further remembered, the following marriage certificate was filed in my	hereby certify that on the day of Hond.
ma at	at Danville
State	of Hend Trad
and P. Indiana, Groom Gerald & Moras	at Danville County, State of Tod County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of
bride Co Co L. Her Per	by the Clerk of the Circuit Court
vere by me united in marriage as authorized by a marriage license issued for County	Official Designation May 19
Dated this	Cianed Island
day of	Official Designation Question 19 Clerk Signed Many Response Circuit Court
	and day of Way
filed	and Caro Certain

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

.. Circuit Court

Health under Authority	HENDRIC	County	20.81 of Application
Effective July 1, 1977		EFMALE (7	
MALE Somination Report Dated 5-7-8	81	Medical Examination Report Dated 5-8-8	1
Medical Examination Report Dated		Name of Physician J. S. Srurs	~
Name of Physician R. S. Shuren	Wh		representation or ne
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed	"False statement — w ni ".	oever procures the issuance of a license to marry by any false statement.	or pretense
ALL QUESTIONS MUST BE ANSWERED. IC. 18500.00 shall be fined in any sum not exceeding five hundred dollars (\$500.00 MALE APPLICANT		FEMALE AFFLICANI	
Name Ffrst // Middle	No bolo	Jammy S	Thomas
Date of Birth Month Day	X 99 /	Date of Birth Month Day	Year 19 bes
120	/ 14/	Place of Birth (State or foreign country)	1
Carlo Mas Coun	aty State	Residence Address Street or R. R. Coalismelle	County State
Residence Address Street or R. R. City, Street or R. R. Court News	I. Ind.		gend . Ind.
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by: Birth Certificate Judicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree		Date of office and a second of the second of	
Other (Specify)		Other(Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes 🗆	1. Are you now or have you ever been adjudged to be of unsound mind?	No Tyes D
If answer is "yes", has the adjudication been removed?	No □ Yes □	If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	No□ Yes□
2. Are you afflicted with a transmissible disease?	No Yes	Are you related to the male applicant closer than second cousin?	No Yes O
 Are you related to the female applicant closer than second cousin? Are you now under the influence of intoxicating liquor? 	No Yes 🗆	4. Are you now under the influence of intoxicating liquor?	No Ves D
5. Are you now under the influence of a narcotic drug?	No Yes 🗆	5. Are you now under the influence of a narcotic drug?	No Yes O
6. List the full names of any dependent children.		6. List the full names of any dependent children.	
			250
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or orders to support the above	
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfact.	No Yes	dependent children? If answer is "yes", it is required that this Application be accompanied by sat	No□ Yes□
compliance with any courtorder, or orders issued for their support.	ory proof that you are in	compliance with any court order or orders issued for their support.	listactory proof that you are in
8. Full name of father John New Dlo		8. Full name of father harles seen the	max
Residence of father (if deceased so state)		Residence of father (if deceased so state) Coaterville	nd
Birthplace of father (State or foreign country) Andrange		Birthplace of father (State or foreign country) Including	
9. Full maiden name of mother Euclism Witt		Bu hain 8	Anthin
Residence of mother (if deceased so state)	nol	9. Full maiden name of mother.	- Swining
bedie		Residence of mother (if deceased so state)	V
State of Indiana		Birthplace of mother (State or foreign country) State of Indiana,	
County of HENDRICKS I depose and state the in this application is	s true and correct.	LIENTONICKS Lee. I depose and sta	ate the information given tion is true and correct.
Signey Timothy J. Hu	bble	V Bosses of	Champa.
New Address Boy 178 Contexus	200 And	Signed Signed AC Cont	En recelled of 2
Subscribed and sworn to before me this 20 day of	211 81	New Address	The st
Mary Sand Pussel for HENDRICK	19.4	Subscribed and swern to before me this.	199 19
- Cark	Circuit Court	J BUY SUN KUSSE HEND	ORICKS 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 parent		to anly one parent
signs, state facts which render the consent of the other parent unnecess.		We, the parents, of this applicant hereby give consent for this mary	
		signs, state facts which render the consent of the other parent unn	ecessary

State of Indiana,			
County of HENDRICKS ss:		State of Indiana,	d
Signed		County of HENDRICKS	
Signed	Father	Signed Karke Jee flo	MO2 Father
Signed Subscribed and sworn to before me this day of	Mother	Signed	Mother
day of		Subscribed and sworn to before me this 20 day of	194 190
		Mary have to	ussell clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY O	RDER OF COUR	T. A marriage license having been refused to the above	
in County Superior	197	T. A marriage license having been refused to the above urt by written order issued.	named parties, the
in Clarks Office authorizes and dir RETURN OF MA	rects the issuance o	f a marriage light	CO CO and lifed
RETURN OF MA	RRIAGE LICENSI	E AND DATE OF THE PROPERTY OF	
of Indiana dated the	ce a marriage licen	E AND MARRIAGE CERTIFICATE use issued by the clerk of the HENDRICKS	Circuit Court
Simptly Halder of	11 lay	se issued by the clerk of the HENDRICKS 19	bushand and wife
Be it further remembered, the following marriage certificate	aa	nd Let, authorizing the joining together as	s husbana and
one thousand	nus jued in my o	nd	~~
State of Indiana C		day of day of	2 11 ford
and, Bride Do My	le.	of County of	Hora .
were by me united in marriage	of \	nd Samuel Stores	0.0
			JENIDDICKS
Dated this day of Marriage		that purpose by the Clerk of the Circuit Court of	ILINUNICAG
8	, 19		
Filed and recorded in accordance with the laws of the State of		Signed Dank Burns Official Designation Mustu	***************************************
the taws of the State	of Indiana this	and a s	.1981

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

No. 225

110		
File_	AND DESCRIPTION OF THE PARTY OF	
		Marian Inc.
	5-20-81	
	Det CA II	
X .	Date of Applicati	on

MALE Medical Examination Report Dated 5-18-81	FEMALE Date of Application		
Name of Physician & Kounday MD	Medical Examination Report Dated 5-18-81		
	6,		
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT	ver procures the issuance of a license to marry by any false statement representation		
Name First Middle Last Deveno	Name First Middle Applicant		
Date of Birth Year	Date of Birth Month Low Scholer		
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 19.5-3		
Residence Address Street of R. R. City County State	Residence All Indiana)		
304 Maple Tille Pefa. On.	558 Won R. R. Pild County State		
Previous Marital Status: Never Married OR Last Marriage Ended By. Death Divorce Annulment Divorce Annulment	Previous Marital Status: Never Married OR		
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D		
	Date of birth verified by: Birth Certificate Judicial Decree		
Other (Specify) Wrivers License w/p.	Other (Specify) Warren License WID.		
1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐ If answer is "yes", has the adjudication been removed? No ☐ Yes ☐	1. Are you now or have you ever been adjudged to be of unsound mind?		
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No □ Yes □		
3. Are you related to the female applicant closer than second cousin? No 2 Yes 0	2. Are you afflicted with a transmissible disease? No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐		
4. Are you now under the influence of intoxicating liquor? No Yes	4. Are you now under the influence of intoxicating liquor? No □ Yes □ No □ Yes □		
5. Are you now under the influence of a narcotic drug? No Yes O	5. Are you now under the influence of a narcotic drug?		
6. List the full names of any dependent children.	6. List the full names of any dependent children.		
	Lore ann Schober - Syrs.		
	Richard allen " 3 yrs		
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above dependent children?		
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in		
compliance with any court order or orders issued for their support.	compliance with any coupt order or orders issued for their support.		
8. Full name of father of father fath	8. Full name of father James arthur Fine hum		
Residence of father (if deceased so state) Plainfield In	Residence of father (if deceased so state) Mussouri		
Birthplace of father (State or foreign country) Sidlana	Birthplace of father (State or foreign country) Induana		
9. Full maiden name of mother Marie Meal	9. Full maiden name of mother Helen Juaneta Wheeler		
Residence of mother (if deceased so state) Plfd. In	Residence of mother (if deceased so state) Indianapoles .		
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country) Indiana		
State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS State of Indiana,		
County of County	County of San Salada.		
Signed Veal OC Clubs	Signed (11111) 101 1 101 8 46168		
New Address PARK ST. PLFO. IN. 46168	New Address		
Subscribed and sworn to before me this day of May	Subscribed and sworn to before me this 20 th day of May, 1981.		
Mary Jane Aussell Clerk HENDRICKS Circuit Court	Mary Jane Russell Clerk MENDRICKS 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 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		
signs, state facts which render the consent of the other parent unnecessary	signs, state facts with the signs of the sign of the		
State of Indiana,	State of Indiana, HENDRICKS } ss:		
County of HENDRICKS \$ 881	Father		
Signed Father	Signed		
Signed Mother	Signed		
Subscribed and sworn to before me thisday of	Subscribed and sworn to before the things and the sword control of the s		
Clerk			
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the		
HENDRICKS LICENSE ISSUED BY ORDER OF COCK	T. A marriage license having been related and filed urt by written order issued		
directs the Issualice of			
authorizes and dis-			
	se issued by the clerk of the		
Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of a	se issued by the clerk of the		
RETURN OF MARRIAGE LICENSIA Be It Remembered, there was filed in my office a marriage licent day of	se issued by the clerk of the		
RETURN OF MARRIAGE LICENSIA Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of a Be it further remembered, the following marriage certificate was filed in my o I,	se issued by the clerk of the		
RETURN OF MARRIAGE LICENSIA Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of a Be it further remembered, the following marriage certificate was filed in my o I,	se issued by the clerk of the goining together as husband and wife nd goine, authorizing the joining together as husband and wife fice, to-wit: hereby certify that on the goine of go		
RETURN OF MARRIAGE LICENSIA Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of I, one thousand nine hundred and State of Indiana Green	se issued by the clerk of the		
RETURN OF MARRIAGE LICENSES Be It Remembered, there was filed in my office a marriage licent of Indiana dated the day of a Be it further remembered, the following marriage certificate was filed in my of thousand nine hundred and and a State of Indiana, Green and the state of Indiana, Green and Indiana, Green	se issued by the clerk of the		
RETURN OF MARRIAGE LICENSES Be it Remembered, there was filed in my office a marriage licent of Indiana dated the day of a Be it further remembered, the following marriage certificate was filed in my of a one thousand nine hundred and a State of Indiana, Groom and, Bride of Indiana, Groom and, Bride of Indiana, Groom and and and a state of Indiana, Groom and Indiana,	se issued by the clerk of the		
RETURN OF MARRIAGE LICENSIA Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of I, one thousand nine hundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for County. Dated this	se issued by the clerk of the		
RETURN OF MARRIAGE LICENSES Be it Remembered, there was filed in my office a marriage licens and Be it further remembered, the following marriage certificate was filed in my of it. one thousand nine hundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for County. Dated this	se issued by the clerk of the		

APPLICATION FOR MARRIAGE LICENSE

File_

.. Circuit Court

Form Prescribed By Indiana State Board of APPLICATIO	ON FOR MA	ARRIAGE LICENSE	File	20-81
Health under Authority of LC 31-1-3-2	HENDRICKS	County	Date of	Application
Effective July 1, 1977		FEMALE	5-2-	81
MALE MALE MALE MALE MALE MALE MALE MALE		Medical Examination Report	Dated O	01
Medical Examination 100		Name of Physician	no plada	and
Name of Physician Laurd Haggaria	whoeve	r procures the issuance of a license to mar	ry by any false statement, re	epresentation or pretense
Name of Physician ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	statement	FEMAL	E APPLICANT	
shall be fined in any sum not exceeding five indicators. MALE APPLICANT		Name First 0	Middle (NMI)	Q 0 Last
Name First Middle	last	Date of Birth Month	Day	Year
Date of Birth Month Day	6	Place of Birth (State or foreign country)	/5	1942
Place of Birth (State or foreign country)		Origden,	rapria	County
Residence Address Street or R. R. City County	State O .	Residence Address Streetlor R.	Plainfield	and.
1227 C. Summer, Shapes		Previous Marital Status: Never Married	OR /	
Previous Marital Status: Never Married OR		Marriage Ended By Death Divorce	Annulment U	- H
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificat	g D Judicial Decree	
	oture	Other (Specify)		
Other (Specify)	No Yes	1. Are you now or have you ever been adjudge	ed to be of unsound mind?	No Yes D
1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No T Yes	If answer is "yes", has the adjudication bee		No □ Yes □
If answer is "yes", has the adjudication been removed. 2. Are you afflicted with a transmissible disease?	No Yes -	Are you afflicted with a transmissible disea Are you related to the male applicant close	r than second cousin"	No Yes
3. Are you related to the female applicant closer than second cousin?	No X Yes D	Are you related to the male applicant close Are you now under the influence of intoxic	ating liquor	No Yes
4. Are you now under the influence of intoxicating liquor?	No Yes O	Are you now under the influence of a narco Are you now under the influence of a narco		No Yes a
5. Are you now under the influence of a narcotic drug?	110/ 110	6. List the full names of any dependent childs		7 7 7
6. List the full names of any dependent children.				
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or ord	ders to support the above	No□ Yes□
dependent children?	No Yes	dependent children? If answer is "yes", it is required that this A	polication be accompanied by sa	
If answer is "yes", it is required that this Application be accompanied by satisfactory pro	of that you are in	compliance with any court order or orders		
compliance with any court order or orders issued for their support.	coai	8. Full name of father Brong	e Washen	aton Ely
8. Full name of father Agencia agents) Agencage A		Residence of father (if deceased so state)	deceas	ell 1
Residence of father (If deceased so state)		Birthplace of father (State or foreign country	1) rai	nia
Birthplace of father (State or foreign country)	0	1/2	0 m. (alten
9. Full maiden name of mother 3 1800 eq.	^	9 Full maiden name of mother	Durde	Lunania
Residence of mother (if deceased so state)	02.	Residence of mother (if deceased so state)	Lugicia,	Ougura
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign count		ua
State of Indiana, County of HENDRICKS Sas: I depose and state the infinity in this application is true.	ormation given e and correct.	State of Indiana, County of HENDRICKS	ss: I depose and st in this applica	ate the information given tion is true and correct.
y O parel o Hay	1110	9/20	.00 Fles	
Signed 12 27 F		Signed V. 120	22 F/Su	mor ave
New Address dudple, and	46227	New Address / O	and the down 4	6229
Subscribed and sworn to before me this day of HENDRICKS		Subscribed and sworn to before me this	- HENI	ORICKS Circuit Court
Clerk TIETORICKS	Circuit Court	TOTAL TOTAL CONTROL OF THE PARTY OF THE PART	Clerk	ORICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT O	R GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If o	only one parent	We, the parents, of this applicant hereb	by give consent for this ma	rriage. If only one parent
signs, state facts which render the consent of the other parent unnecessary	Frederic Constitution (Sp. 19	signs, state facts which render the con-		
State of Indiana,		St. 1.		
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	88:	
Signed	Father	Signed		Father
Signed			***************************************	Mother
Subscribed and sworn to before me thisday of		Signed	***************************************	19
		Subscribed and sworn to before me this.	day of	Cler
			***************************************	***************************************
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORD	ER OF COURT	C. A marriage license having been	n refused to the abov	e named parties, the
County	Cor	irt by written ander i		and filed
authorizes and direct	s the issuance of	a marriage license to the above n	amed parties.	
RETURN OF MADD	TACE PROPER			
julia of my office (I THUTTINGE ILLEN	20 100010 1 1 11 1 1 1 1	HENDRICK	Circuit Cour
of Indiana dated the day of day of M	Lugard	, 19.5 authorizing	the joining together	as husband and wife
Be it further remembered, the following marriage certificate we	as filed in my of	nd syst authorizing		
			day of June	2
State of Indiana, Groom		a suppose	. County of	11 tostor
State of Indiana, Groom State of House and, Bride Small Electronic	0	Janes Comment	County, State of	Did
were by me united in marriage as authorized by a marriage lice	of	Hend	County, State of	Wid .
were by me united in marriage as authorized by a marriage lice. Dated this	ense issued for t	hat purpose by the Clerk of the Cir	cuit Court of	HENDRICKS
Dated this day of		k.,		
		Signed Example	J. Ralpl)
Filed and recorded in accordance with the laws of the State of	Indiana this	Official Designation	Atex	81
	0/118	day of	. 0	. 19

.Clerk

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

42

TO A STATE OF THE	County 5-2081
MALE Medical Examination Report Dated \$ -18 - 81	FEMALE Date of Application
Name of Physician D. B. Haggard	Medical Examination Report Dated 5-18-81
Name of Thysician	
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—What fined in any sum not exceeding five hundred dollars (\$2.00 mg)"	Name of Physician D. B. Hoggard oever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	of teleprocures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle	Name TOWNEY FEMALE APPLICANT
Last Hall	First \ Middle
Date of British	Date of Birth Month
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. City County State	State or foreign country)
9114 and so Do. Ind ple.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	H13 431 Hickory & R. City Polid. State
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
6.25	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) D. L. of Piol.	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind?" No Yes	
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No □ Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □
2. Are you afflicted with a transmissible disease?	2 4
3. Are you related to the female applicant closer than second cousin?	2 Are would be a few and a
4. Are you now under the influence of intoxicating liquor? No Yes	4. Are you now under the influence of intoxicating liquor? No W Yes No W Y
5. Are you now under the influence of a narcotic drug? No. Yes	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	Company of the Compan
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Rechard a, Haulay	compliance with any court order or orders issued for their support. 8. Full name of father Slaw O. Slawsott
Residence of father (if deceased so state) Policy Qued.	o. Full name of father Common
residence of farmer (1) deceased so states	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Towns of some
9. Full maiden name of mother fact Washingt	9. Full maiden name of mother Dende J. Carefield
Residence of mother (if deceased so state)	80.00
	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
and the second	County of
Signed X Jany Hanson	Signed & burry thewark
New Address 9/14 CANDES INDPLS. IN.	New Address 9114 andles Dr. alnolph In.
Subscribed and sworn to before me this 20 day of Many 1981.	Subscribed and sworn to before me this 30 day of 19
Mass Core & 2000 HENDBICKS	HENDRICKS
Many face Russoll Clerk HENDRICKS Circuit Court	Many Journal Clerk HENDRICKS Circuit Court
Many favo Russon Gerk HENDRICKS Circuit Court	Many Parolleuse Q Clerk HENDRICKS Circuit Court
Consent of Parents, Parent or Guardian	Consent of Parents, Parent or Guardian
Many favo Russon 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
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Clerk HENDRICKS Circuit Court
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Filed and recorded in accordance with the laws of the State of Indiana this.....

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APPLICATION FOR MARRIAGE LICENSE

Date of Application

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR	MARRIAGE LICENSE
of I.C. 31-1-3-2 Effective July 1, 1977	CKS County Date of Application
MALE Medical Examination Report Dated 5-18-81	FEMALE Medical Examination Report Dated Sic Clarks
Mai Mai D	Name of Physician 3-18-8/
The Anguage Dr. Anguage Dr. 10, 31-1-3-6 prescribed "False statement - Wh	never procures the issuance of a license to marry by any false statement, representation or prete
ALL QUESTIONS MUST BE ANSWERED. In shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name Oliaaleth A. Penning For
Date of Right Month Day	Date of Birth Month Day
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. State 122 William W. Braundurg
Dox 431 Dorth Julin Su	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree
Other (Specify) On Jucius	Other (Specify) & A. Secure
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed" No D yes
2. Are you afflicted with a transmissible disease? No ves No ves No ves	2. Are you afflicted with a transmissible disease" No V yes 3. Are you related to the male applicant closer than second cousin? No V yes
 3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? 	4. Are you now under the influence of intoxicating liquor? No Ves
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug" No Tyes
6. List the full names of any dependent children.	6 List the full names of any dependent children
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children? No□ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father was like the state of	8. Full name of father WM / Lymnigton
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother.	9. Full maiden name of mother William Climento
Residence of mother (if deceased so state) Alchaged	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana,	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.	State of Indiana. County of HENDRICKS Bas: I depose and state the information gives in this application is true and correct in this application is true and correct in this application.
Signed Firsall E. Juland La	Sharbeth Offernation
New Address P. 1 Box 88 James town la	New Address & 1 Boy 88 Jamestown
Subscribed and sworn to before me this 20 day of 198/	Subscribed and sworn to before me this 20 day of May 1981
Il ary Jane Tusself Clerk HENDRICKS Circuit Court	Illand la 20 10 unique
	The part Court Cou
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
SignedFather	County of HENDRICKS
Signed	Signed Father
Subscribed and sworn to before me this day of 19	Signed Mother
	Subscribed and sworn to before me thisday of
COMPLETE IF MADDA CO	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS County Co authorizes and directs the issuance of	ourt by written order issued and filed
Democratic ()	I a marriage license to the above named parties.
the MI Remembersh 11	F AND MADDE
of Indiana dated the day of day of day	se issued by the clerk of the HENDRICKS Circuit Court
Be it further remembered the fill	19
Be it further remembered, the following marriage certificate was filed in my office a marriage licen day of	fice, to-wit:
one thousand nine hundred and SSI State of Indiana, Groom And SSI und, Bride Slave State SSI	vereby certify that on the 29 day of Man
State of Indiana, Groom And Ole Dischard of Country we united in marriage as authorized by a marriage as authorized by a marriage as authorized by a marriage of the country of the countr	it same a County of Hard
vere by me united in	County, State of
vere by me united in marriage as authorized by a marriage license issued for to dated this day of day of	hat myrnoge but County, State of
Dated this day of 198	HENDRICKS HENDRICKS
, 19	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed C. Marco
of the State of Indiana 11.	

County.

Dated this.....

23rd day of MAY , 19 81

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

STATE OF INDI

MALE Medical Examination Report Dated Solver Specification Many of Physician Male ASNEED IC 31-364 preserved "False statement—Wherever procures the isocance of a license to marry by any false statement, representation of proton MALE APPLICANT Name First Match March	Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977 HENDRIC	MARRIAGE LICENSE No. 239 File
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Pere by	TRAUTE LI CHASTAIN	County State of
1 AVAITOR OF THE PROPERTY OF T	Vere by	hat purpose by the Clerk of the Circuit Court of

Signed /s/ WILLIAM A. PAPPANO

, 19.89

HENDRICKS

...Clerk

Circuit Court

Official Designation CATHOLIC PRIEST

11th day of MAY

Signed Some house

APPLICATION FOR MARRIAGE LICENSE

No	23	0	
File	2		
_71) ay	22	1981

HENDRICKS

... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR	MARRIAGE LICENSE File Marriage License
of I.C. 31-1-3-2 Effective July 1, 1977	County Day of Application
MALE Medical Examination Report Dated 5-18-81 Name of Physician 8-0.0.7. Saudden	Name of Physician Q. M. Scudder MD.
ALL OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Wh	oever 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
Name First Middle Last	Name First Middle Last
Date of Birth Month Day Year	Date of Birth Month Day Year 19
Place of Birth (State or foreign country)	Place of Birth (State of foreign country)
Residence Address Street or R. R. City County State	Residence Address Street or R. R. Brownsburg State
Previous Marital Status: Never Married P. OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of oirth verified by. — Birth Certificate — Sudicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No 4 Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes ☐ If answer is "yes", has the adjudication been removed? No ☐ Yes ☐	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No P Yes
 3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No ♥ Yes □ 	3. Are you related to the male applicant closer than second cousin? No P Yes D 4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No 🛱 Yes	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Ves U
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Horald, English Hunt	8. Full name of father Robert Congene Wrake
Residence of father (if deceased so state)	Residence of father (if deceased so state) Brownsburg. M.
9. Full maiden name of mother. Many & Markey.	Birthplace of father (State or foreign country) Indiana
Residence of mother (if deceased so state)	9. Full maiden name of mother (a Welyn Leanore) Touris
Birthplace of mother (State or foreign country)	Residence of mother (if deceased so state)
State of Indiana,	Birthplace of mother (State or foreign country) State of Indiana,
S I strue and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
New Address. 144 MIDDLE BODY ELKHART	Signed, alle J. Drake
Subscribed and sworn to before me this. 22 day of 108	New Address 1144 Middle bury St., Elkhart, In 46514
Mary Jane Russell Clerk HENDRICKS Circuit Court	Subscribed and sworn to before me this 22nd day of May 1981
CONSENT OF PARENTS, PARENT OR GUARDIAN	Mary Jane Russell Gerk HENDRICKS 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, County of HENDRICKS ss:	State of Indiana,
SignedFather	County of HENDRICKS ss:
Signed	Signed Father
Subscribed and sworn to before me this day of	Signed
Clerk	Subscribed and sworn to before me thisday of, 19
COMPLETE IF MARRIAGE LICENSE ISSUED DATE	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	A marriage license having been refused to the above named parties, the table to the above named parties, the analysis and filed
authorizes and directs the issuance of	a marriage license to the
RETURN OF MARRIAGE LICENSE f Indiana dated the	AND MARRIAGE CERTIFICATE
day ofday	of the clerk of the HENDRICKS Circuit Court
e it further remembered the full	19.1. authorizing the joining together as hysband and wife
the following marriage certificate was filed in my office thousand nine hundred and he tate of Indiana, Groom at	ce, to-wit:
tate of Indiana, Groom at ad, Bride of ere by me united in marriage as authorized by a marriage license issued for the	and the day of fine
nd, Bride Oleo Of Turkt	, County of the
ofof	County, State of
ere by me united in marriage as authorized by a marriage license issued for the ated this	purpose by the Clerk of the Circuit Court of HENDRICKS
	Signed Hannel Daise
iled and recorded in accordance with the laws of the State of Indiana this	ficial Designation Mate

MALE

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

No. 231
File
may 22 1981 Pate of Application
Pate of Application
5-18-81
! Haggard MO
nu 6-1

Circuit Court

HENDRICKS

Medical Examination Report Dated_ FEMALE Medical Examination Report Dates Name of Physician Wavid B. Haggers M. Name of Physician Maria ALL QUESTIONS MUST BE ANSWERED, L.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by a MALE. APPLICANT. MALE APPLICANT FEMALE APPLICANT Date of Birth Place of Birth (Stat Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D 1. Are you now or have you ever been adjudged to be of u If answer is "yes", has the adjudication been removed? No P Yes No D Yes D If answer is "yes", has the adjudication been rem 2. Are you afflicted with a transmissible disease? No T Yes No Yes O 2. Are you afflicted with a transmissible disease No Yes D you related to the female applicant closer than second cousin? No Yes 3. Are you related to the male applicant closer than sec 4. Are you now under the influence of intoxicating liquor No TYes No Yes D 4. Are you now under the influence of intoxicating liquor No Yes No Yes D 5. Are you now under the influence of a narcotic drug Are you now under the influence of a narcotic drug? No Yes O 6. List the full names of any dependent children. 6. List the full names of any dependent children 7. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children No Yes dependent children? No O Yes O If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any cour order or orders issued for their support Birthplace of mother (State or foreign country). Birthplace of mother (State or foreign country) State of Indiana, State of Indiana HENDRICKS 5991 LAKE CLUB SQ, COLLINGUS OH 43227 Subscribed and sworn to before me this 22 day of 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 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of Mother Subscribed and sworn to before me this _______day of _______, 19_____. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued..... ...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 ____, authorizing the joining together as husband and wife of Indiana dated the Alamonday of May Brian & Puskott Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 30 day of one thousand nine hundred and State of Indiana, Groom Bulanof..... were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County. County. Dated this. day of May, 1981. Official Designation ... Filed and recorded in accordance with the laws of the State of Indiana this... .. Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

232

5-82-81 Date of Application

..Clerk

.. Circuit Court

HENDRICKS

MALE FILC	FEMALE Medical Examination Report Dated 5-11-8
MALE Medical Examination Report Dated 5-11-81	Name of Physician James Black
Name of Physician James Aslack	
Name of Physician ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Whoo shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	First Middle
Name / First - Middle / Vernoley	Date of Birth Month Day Year
Date of Birth Month Day /9.54	Pate of Birth 9 24 /45-7
Place of Birth (State or foreign/country)	Place of Birth (State or foreign country) Deech Grove Jud
Residence Address Street or R. R. Gity County State	Residence Address Street or R. R. Bourg Neugl State
1877 Douglass Glad Louwille Jefferson 199	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
1 1 mit	Other (Specify Drivers License Upicture
Other (Specify) Wrues Successed and Julium No Wyes 1. Are you now or have you ever been adjudged to be of unsound mind? No Wyes	1. Are you now or have you ever been adjudged to be of unsound mind? No P Yes
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes C 3. Are you related to the male applicant closer than second cousin? No Yes C
3. Are you related to the female applicant closer than second cousin? No Yes	3. Are you related to the male applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor? No Yes
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes C If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Phellip James Harnden, St.	8. Full name of father James arioch Adams
Residence of father (if deceased so state)	Residence of father (if deceased so state) Prounsburg Ind.
Birthplace of father (State or foreign country) Stay Stad	Birthplace of father (State or foreign country)
9. Full maiden name of mother Freedo Gatherine Mitchell	9. Full maiden name of mother audio Taura Whitaler
Residence of mother (if deceased so state) Koulswell Ly	Residence of mother (if deceased so state) Brownsburg, and
Birthplace of mother (State or foreign country) Unknown.	Birthplace of mother (State or foreign country) Leaturely
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information gives in this application is true and correct
Signed Havin Lorge Harrdon	County of HENDRICKS in this application is true and correct
	Signed X Inelia Caroline Islan
New Address 877 Donefan Blud Lot ?	New Address / 877 Day 18 Blod,
Subscribed and sworn to before me this. 3 day of Mo. 1981.	Subscribed and sworn to before me this 22 day of 1104 19.81
Many Jane Kussell Clerk HENDRICKS Circuit Court	Mary Jane Kussell Glerk HENDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONGRAME OF THE PROPERTY.
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,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed Father	
Signed Mother	Signed Father
Subscribed and sworn to before me this	Signed Mother
	Subscribed and sworn to before me this day of 19
COMPLETE IE MADDIA CO. T.	Clerk
HENDRICKS County	. A marriage license having been refused to the above named parties, the
n Clarks Office county superior Cou	rt by written order issued 3-day waves and filed
the instance of	a marriage license to the above named and the
Be It Remembered there was flad:	AND MARRIAGE CERTIFICATE
Indiana dated the	cissued by the clerk of the HENDRICKS Circuit Court
Be it further remembered the fill	, 19.5 authorizing the joining together as husband and wife
beaut Hart marriage certificate was filed in my off	ice, to-wit:
te thousand nine hundred and	Teou certiful that and it
Beny Hart marriage certificate was filed in my offine thousand nine hundred and 81 tate of Indiana, Groom Kevin & Harnden of my offine harden of my offine by me united in marriage as outh my offine harden of my offine harden of marriage as outh my offine harden of my offine harden of my offine harden of the marriage as outh my offine harden of the marriage as outh my offine harden of the my offine harden o	Drownsburg, Country of Hendricks,
1 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ated this day of Marriage license issued for th	the Purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	
iled and recorded in accordance with the laws of the State of Indiana this	Signed Benny Hart ficial Designation Wayston
the laws of the State of Indiana this	ficial Designation Minister

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

033	
No. 253	
	UI.

MALE Medical Examination Report Dated 5-80-8/	Date of Application
Name of Physician WM Colwords	FEMALE Medical Examination Report Dated 5-22-81
Name of Physician	Name of Division Report Dated 5-22-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whe	Dever program Um Edward
MALE APPLICANT	Name of Physician Wm Edward oever procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle (Last) 10	FEMALE
Date of Birth Month Day Your Telegraphy	Middle
Place of Birth (State or foreign country)	Date of Birth Month
Justicastle, Indiana Street or R. R. Olivina	Place of Birth (State of foreign country) Day Year 1963
Residence Address M. Center Plainfield State	Recidence
Previous Marital Status: Never Married OR	3/20 3 Street or R. B. City County States
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married Q OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Discours
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	Other (Specify)
No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?
No P Yes U	2. Are you afflicted with a transmissible disease?
3. Are you now under the influence of intoxicating liquor? No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No	3. Are you related to the male applicant closer these
5. Are you now under the influence of a narcotic drug? No Yes Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
	A STATE OF THE STA
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	× D × D
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Mowen Warn Completel So	8. Full name of father Linea . Durablack
Residence of father (if deceased so state) 125 M. Canter Planfield In	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Viewoungs, Indiana	proper , or .
9. Full maiden name of mother Roseland Mae Howers	Birthplace of father (State or foreign country)
Residence of mother (if deceased so state) Plainfield, bulliance	9. Full maiden name of mother Mary B. Alexant
91 41	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) horosallo, budiona State of Indiana,	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.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
Mr. Landon	County of in this application is true and correct.
Signed Juan Mangover	Signed Vivienne V Broadhuhn
New Address /25 North Center St	New Address 125 North Center St
Subscribed and sworn to before me this 24 day of Man, 198/	Subscribed and sworn to before me this 22 day of Mus 19 81
More Jone Russell Clerk HENDRICKS Circuit Court	Mary Jan P. HENDRICKS
	Clerk 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 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.	signs, state facts which render the consent of the other parent unnecessary.
I the Folher Have fell Custody	
Mark and T. H.	
Sounty of HENDRICKS ss:	State of Indiana, HENDRICKS } ss:
	County of HEINDRICKS
Signed Massir D Engshall Father	Signed Father
Signed Mother	Signed Mary B. Broadkerker Mother
	Subscribed and sworn to before me this 22 day of May 1981
Mon You Rusself Clark	Many Jane Russell Gerk
Clerk	
OMPLETE 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
	marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE A	ND MARRIAGE CERTIFICATE
We mombana 11	canad by the clerk of the
indiana dated the	19 / authorizing the joining together as husband and wife
eit further remembered the Cample QQ II and	Viviens V. Broodheli
the following marriage certificate was filed in my office	eby certify that on the day of Marion
e thousand nine hundred and S at	
indiana, Granne	TOLA - Country, Deare of
	The way
re by me united in marriage as authorized by a marriage license issued for that	murrose by the Clerk of the Circuit Court of HENDRICKS
unty. and marriage as authorized by a marriage license issued for that	purpose og till omning
ted this day of May, 1981	Signed Signature Gada
	Signed
Office of and recorded in accordance with the laws of the State of Indiana this	day of the , 1951
act in accord	Clerk Russell
Sig	ned HENDRICKS Circuit Court

Form Prescribed By Form Prescribed By Indiana State Board of Health under Authority of LC, 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

No.	033
110	000

APPLICATION FOR MARRIAGE LICENSE HENDRICKS File_ County May 22/98/ Date of Application MALE Medical Examination Report Dated 5-80-81 FEMALE Name of Physician WM Colwords Medical Examination Report Dated. ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense."

MALE APPLICANT Name FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married QOR Last Marriage Ended By: Death Divorce Annulment D Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree Other (Specify)_ Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? No□ Yes□ No P Yes D If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? No Yes 🗆 No D Yes D 2. Are you afflicted with a transmissible disease? No W Yes related to the female applicant closer than second cousin! No Yes D Are you related to the male applicant closer than second cousin. 4. Are you now under the influence of intoxicating liquor? No Ves D No D Yes D 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes O No D Yes D 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 6. List the full names of any dependent children. 7. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in No Yes O If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their suppor 8. Full name of father Machien Clance Birthplace of father (State or foreign country) Birthplace of father (State or foreign country) 9. Full maiden name of mother Roseland Residence of mother (if deceased so state) Plainfield Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country)_ State of Indiana. State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct. **HENDRICKS** County of..... Signed Dlan Campbell Signed Vivienne V Broadhuhn New Address 125 North Contor St New Address 125 North Center St Subscribed and sworn to before me this 22 day of Man Morey Jone Russels HENDRICKS CONSENT OF PARENTS, We, the parents, of this ap signs, state facts which rea , hereby give my consent for I The Comphell. 9 State of Indiana, County of .. HEND Signed. subscribed and sworn to before me this 22 Subscribed and sworn to b COMPLETE IF MA 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.... ., 19. L., authorizing the joining together as husband and wife of Indiana dated the ... and Vivienne V. Broadhulu Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the _____day of _____ one thousand nine hundred and... State of Indiana, Groom Massin D. C. 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.

.Clerk

Circuit Court

HENDRICKS

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

APPLICATION FOR MARRIAGE LICENSE

234 5 - 22 - 81
Date of Application

.... Circuit Court

m Prescribed By hana State Board of alth under Authority LC. 31-1-3-2	FILE SE FILE SE STATE OF Application STATE OF THE SE STATE OF Application STATE OF APPLICATIO
ective July 1. 1977	FEMALE Medical Examination Report Dated 5 22-8
MALE 5-22-81	
Report Dated	
Name of Physician False statements	ent—Whoever procures the issuance of a license to marry by any false statement, representation or pretent
LL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed Translated by fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
me First Middle	Date of Birth Month 9 13 Year S
to of Birth Month Day	Place of Birth (State or foreign country)
ace of Birth (State or foreign country)	City C
sidence Address Street or R. R. City County Stat	
20 Box 72 amo Ind.	Previous Marital Status: Never Married OR
evious Marital Status: Never Married OR	Marriage Ended By: Death Divorce Annulment
Marriage Ended By: Death Divorce Annuiment	Date of birth verified by: Birth Certificate Judicial Decree
st marriage Didde by: Birth Certificate Judicial Decree	Other (Specify) D. & Spirit
Other (Specify) D. & W/ Rich	Yes 1. Are you now or have you ever been adjudged to be of unsound mind? No A Yes
Are you now or have you ever been adjudged to be of unsound mind:	Yes If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed?	Yes ☐ 2. Are you afflicted with a transmissible disease? No 4 Yes No 4 Yes
	Yes 3. Are you related to the man
No 7	Yes ☐ 4. Are you now under the influence of intoxicating inquor: No ☐ Yes ☐ 5. Are you now under the influence of a narcotic drug? No ☐ Yes
Are you now under the influence of a narcotic drug?	5. Are you now under the interest of any dependent children.
List the full names of any dependent children.	
	7. Are you required by any court order or orders to support the above
	Yes dependent children?
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that y	ou are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you a
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued to their support
Full name of father Robert & Moen la	8. Full name of father
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother Douse M. M. of any	9. Full maiden name of mother Modeled of Danghman
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, I depose and state the information	on given correct. State of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.
County of HENDRICKS Ss: in this application is true and	County of County of
Signed & Lum Preente	Signed X Datty h. Tunde
New Address P.O. BOX 77 AMOLIN,	New Address P.O. BOX /2 Cord Villa
Subscribed and sworn to before me this 22 day of	Subscribed and sworn to before me this 22 day of 198
Many gra Rusell Clerk HENDRICKS Circu	uit Court May Pour Russoll Clerk HENDRICKS Circuit
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 on	
igns, 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 of HENDRICKS ss:	County of HENDRICKS
Signed	Father Signed
Signed	N.
Subscribed and sworn to before me this	Dig ned
	and short to before the title
	Clerk
HENDRICKS LICENSE ISSUED BY ORDER	OF COURT. A marriage license having been refused to the above named parties
County	Court by written and a :and
nauthorizes and directs the	issuance of a marriage license to the above named parties.
RETURN OF MARRIAGE	E LICENSE AND WADDIAGE
of Indiana dated the	rriage license issued by the clerk of the HENDRICKS Circuit
Donnes R. Kleen Lee	and at the sed in my office, to-wit:
Be it further remembered, the following marriage certificate was fil	ed in my office, to-wir
The state of the s	· · · · · · · · · · · · · · · · · · ·
County. County.	issued for that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this a day of	13.01
- And Market and Andrews	Signed Soly O. Mourel
County. Dated this day of Filed and recorded in accordance with the interest of a marriage license	Signed Official Designation and this day of 19

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No	235	
711		Carll a

MALE 6-11 PI	1/ay 22 1981
Medical Examination Report Dated 3-9-01	FEMALE Date of Application
Name of Physician Beple C. Keslen	Medical Examination Report Dated 5-4-81
ALL OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "Falso and	Name of Physician Reph C. Kerling Hoever 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).	noever procures the issuance of a license to marry by any fel
Name Waniel W. Mman	Name Final APPLICANT
Date of Birth Month Day Year	Date of Birth Barbara Linn, Idast
Place of Birth (Syste or foreign equatry)	Della Tallace
Street of R Bo City	Place of Birth (State or foreign country)
Residence Address State Que. N.C. Commy State	Residence Address Street or D. P.
Previous Marital Status. Never Married G OR	RE Francisco City County State
Last Marriage Ended By. Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Appulment D
0	Date of birth verified by: Birth Certificate Judicial Decree
B Other (Specify) Privers dicense wy p.	Other (Specify) Writing License, 1111
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	The state of the s
If answer is "yes" has the adjudication been removed? No□ Yes□	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
2. Are you afflicted with a transmissible disease? No Yes O	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant elements.
10 - 10 -	4. Are you now under the influence of intoxicating liquor? No Yes No
Are you now under the influence of a narcotic drug? No Ves 0 List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7 Are you sould be
dependent children	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court organizers issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Therty W. Moran	compliance with any court order or orders issued for their support.
1000	8. Full name of father William Hack
Residence of father (if decreased so state)	Residence of father (if deceased so state) Clayton In.
Birthplace of father State or foreign country by	Birthplace of father (State or foreign country) Indiana
Full maiden name of mother & thele M. Wonahue	9. Full maiden name of mother Euris B. Martin
Residence of mother is feweraged so states armel In.	Mo to 0
Birthplace of mother (State or foreign country) Indplo. In	Residence of mother (if deceased so state) Clarifold Sn.
State of Indiana	Birthplace of mother (State or foreign country)
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	County of HENDRICKS I depose and state the information given in this application is true and correct.
David W Man	R. L. J. b
Signed Dance of 10 to	Signed vara poet
New Address 22 ST AUE N. E CAPTEL IN 4637	New Address 22 1 - We / C Carmer 460
wiscribed and sworn to before me this 22 day of 1) ay 1981.	Subscribed and sworn to before me this 22 day of May , 19
Hary are Russell Clerk HENDRICKS Circuit Court	Mary and Jussell Clerk HENDRICKS Circuit Court
ONSENT OF PARENTS. PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
ve. 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
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
ate of Indiana, punty of HENDRICKS } ***	State of Indiana, HENDRICKS ss:
only of	County of
Signed	Signed
Signed Mother	Signed
bscribed and sworn to before me this day of 19	Subscribed and sworn to before me this
	Clerk
Clerk	the share named parties the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the
MENDRICKS Country	art by written order issued
authorizes and directs the issuance of	a marriage license to the above named parties.
TOPACE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS
Be It Remembered, there was filed in my office a marriage licens	e issued by the clerk of the
Indiana dated the and day of May	19 . authorizing the form
an an an an an	d
it further remembered, the following marriage certificate was filed in my of	fice, to-wit: 30 day of Many
toest & Harris	county of Lord
a mousand nine hundred and	County, State of County, State of County, State of
Indiana, Groom	County State of
d, Bride Com Straight of	HENDRICKS HENDRICKS
re by me united in marriage as authorized by a marriage license issued for thunty.	nat purpose by the Otern of the
ted this	. Signed Robert & Horris
day of May, 19 31	101111111111111111111111111111111111111
led and recorded in accordance with the laws of the State of Indiana this	ficial Designation , 1951
ed and recorded	3 day of Clerk Signed One Growth HENDRICKS Circuit Court
order in accordance with the laws of the State of Indiana critical	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

Date of Application

....Circuit Court

Form Prescribed By APPLICATION FOI	R MARRIAGE LICENSE Way 2/2 1981
Health under Authority of LC 31-1-3-2 HEND	ORICKS County Date of Application
Effective July 1, 1977	FEMALE 5-23-81
MALE 5-22-8/	Medical Examination Report Dated
Madical Evamination Report Dated	Name of Physician Amus Plant
Name of Physician Amo () Lach	-Whoever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement"	FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED. IC. 515450 (1997) shall be fined in any sum not exceeding five hundred dollars (8500.00). MALE APPLICANT	Name First Middle Last
Name Fifty Middle Last	h Day Year
The Day Year	Date of Birth
Date of Bitts	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address Street or R. R. Gity County State
Residence Address Street or R. R. City Coulds	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
Other (Specify) And Juleuse No P Yes	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No yes
1. Are you now or have you ever been adjudged to be of unsound mind? No Ves	N F v /D
If answer is "yes", has the adjudication been removed?	No TV V
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No ves u
3. Are you related to the female applicant closer than second cousin: No Yes	4. Are you now under the influence of intoxicating liquor? No yes
4. Are you now under the influence of intoxicating indox. 5. Are you now under the influence of a narcotic drug? Yes	
6. List the full names of any dependent children.	6. List the full names of any dependent children.
The state of the s	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No Yes O
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are	the state of the second st
compliance with any court order or orders issued for their support	compliance with any court order) or orders issued for their support.
8. Full name of father Llorge South Xn.	8. Full name of father Would & Meeps
Residence of father (if deceased so state) Duuxslurg, du	Residence of father (if deceased so state) Dilawashung, tu
Birthplace of father (State or foreign country) W. Ja.	Birthplace of father (State or foreign country)
9. Full maiden name of mother Masgaret Ider	9. Full maiden name of mother Anna R. OSCAND
Residence of mother (if deceased so state) Brownshurg, In	Residence of mother (if deceased so state) Alceased
Birthplace of mother (State or foreign country) W. Va	Birthplace of mother (State or foreign country)
State of Indiana, I depose and state the information gi	iven State of Indiana, I depose and state the information given
County of HENDRICKS 88: in this application is true and corre	County of
Signed Xloryl & Booth	Signed anna Marco Phelas
New Address 26 9 Danny Lane	New Address 269 Danny Low, Harleys ville, PA 19
Subscribed and sworn to before me this 26 day of 194	Subscribed and sworn to before me this day of day of 190
Mary Asset Tusself Clerk HENDRICKS Circuit Co	HENDRICKS OF THE PROPERTY OF T
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 par	we, the parents, of 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 of HENDRICKS } ss:	County of HENDRICKS
Signed Fa	ither Signed Father
Signed Mo	Mothe
Subscribed and sworn to before me thisday of	
13.	Subscribed and sworn to before me thisday of
	CIEFK
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 and it is an and file
authorizes and directs the issu	nance of a marriage license to the above named parties.
Be It Remembered, there was filed in my office and	ICENSE AND MARRIAGE CERTIFICATE
of Indiana dated the day of	ge license issued by the clerk of the HENDRICKS Circuit Court
Re it further real ! South . In	, 19 , authorizing the joining together as husband and wif
I arriage certificate was filed in	n my office, to-wit:
State of Indiana, Groom Server & R.	at brownshing, Country of Hend
and, Bride Sha M. P. Collis	at County of County, State of
were by me united in marriage as authorized by a marriage is	of County, State of County, State of
Dated this	ed for that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of	19
	Official Designation Whister
Filed and recorded in accordance with the laws of the State of I. I.	Official Designation

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County

No	
File	
May 26, 1981	
Date of Application	

MALE Medical Examination Report Dated 5-28-81	FEMALE Date of Application
Name of Physician M. Harfield	Medical Examination Report Dated 5-22-81
Name of Physician 2	
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marrie leading to the second
MALE APPLICANT	
Name Sirst Middle Crist	Name First
Date of Birth Month Day Year	Date of Birth Month Hutchingon
Place of Birth (State or foreign country)	Day Year
Residence Address Street of R. R. Ofty / County / State	Place of Birth (State or foreign country) Conswille Angle
1949 Won Rd. Planfill Indiava	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment O	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivero Lie W/Pie	Other (Specify) Drives Lie W/Pic
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No Ves C 2. Are you afflicted with a transmissible disease? No Yes C	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease? No Yes No Yes
4. Are you now under the influence of intoxicating liquor? No B Yes D	3. Are you related to the male applicant closer than second cousin? No P Yes 4. Are you now under the influence of intoxicating liquor?
 5. Are you now under the influence of a narcotic drug? No ✓ Yes □ 6. List the full names of any dependent children. 	5. Are you now under the influence of a narcotic drug? No Yes No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	- The same of the
	- The Sales of the
	The same that the same that the same to be a
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Joseph J. Course Sr.	8. Full name of father Vergil Tee Oshworth
Residence of father (if deceased so state) Evorsuille, Ind.	Residence of father (if deceased so state) Tomor Androya
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Clause Wengel	9. Full maiden name of mother Mayorie of Best
Residence of mother (if deceased so state) Evorsuille, In	Residence of mother (if deceased so state) & Lama, Indiana
Birthplace of mother (State or foreign country) and	Birthplace of mother (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.	State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.
New Address 1444 Avon Rd. Plainfield In Subscribed and sworn to before me this 26 day of May 1981. May Jone Russell Clerk HENDRICKS Circuit Court	Signed Linda & Nuft hinson New Address 1444 Soon La Plain field C Subscribed and sworn to before me this 26 day of May 1944. May Jone Pussell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
acts which render the consent of the other parent unnecessary	signs, state rates which the sign of the s
State of the	
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
	Signed Father
Signed	Signed Mother
Signed Mother	Subscribed and sworn to before me thisday of19
Subscribed and sworn to before me thisday of	Subscribed and sworn to best to be considered and sworn to be considered an
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license having been refused to the above named parties, the
Cou	ert hy 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 Ath day of May	e issued by the clerk of the HENDRICKS Circuit Court e issued by the clerk of the joining together as husband and wife 19, authorizing the joining together as husband and wife
of Indiana dated the 29th day of May	and marriage certificate Hendricks Circuit Court e issued by the clerk of the goining together as husband and wife going together as husband and wife
of Indiana dated the	and marriage certificate hendricks circuit Court e issued by the clerk of the foining together as husband and wife fice, to-wit: additional and the foining together as husband and wife fice, to-wit: add fice, to-wit: are by certify that on the foining together as husband and wife fice, to-wit:
of Indiana dated the All day of May and Be it further remembered, the following marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the Solowing marriage certificate was filed in my of Indiana dated the India	and marriage certificate hendricks circuit Court e issued by the clerk of the sissued by the clerk of the joining together as husband and wife december that on the day of county of county of the cou
of Indiana dated the day of an an an Be it further remembered, the following marriage certificate was filed in my of l, hone thousand nine hundred and state of Indiana, Groom	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court e issued by the clerk of the , 19 , authorizing the joining together as husband and wife d. d. day of creby certify that on the County, State of County, State of
of Indiana dated the day of an an an Be it further remembered, the following marriage certificate was filed in my of l, hone thousand nine hundred and state of Indiana, Groom	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court e issued by the clerk of the , 19 , authorizing the joining together as husband and wife d. d. day of creby certify that on the County, State of County, State of
Be it further remembered, the following marriage certificate was filed in my office a marriage licens and l,	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court e issued by the clerk of the day of County of County, State of County, State of County, State of HENDRICKS Circuit Court County, State of HENDRICKS
Be it further remembered, the following marriage certificate was filed in my office a marriage licens and license issued for the county, the set of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for the set of Indiana is stated in marriage as authorized by a marriage license issued for the county.	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court e issued by the clerk of the , 19 , authorizing the joining together as husband and wife d. d. d. d. d. County of County, State of County, State of HENDRICKS hat purpose by the Clerk of the Circuit Court of
State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for the County. Dated this Of Indiana dated the Aday of Aday of And And And And And And And An	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court e issued by the clerk of the 19, authorizing the joining together as husband and wife d. Gree, to-wit: ereby certify that on the County of County, State of County, State of HENDRICKS Carcuit Court of County of
of Indiana dated the day of an an Be it further remembered, the following marriage certificate was filed in my off l, be thousand nine hundred and state of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for the County. Dated this day of 19	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court e issued by the clerk of the 19, authorizing the joining together as husband and wife d. Gree, to-wit: ereby certify that on the County of County, State of County, State of HENDRICKS The purpose by the Clerk of the Circuit Court of Signed Signed 19 Signed 19 19 19 19 19 19 19 19 19 19 19 19 10 .

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

No	238
File_	
	5.27-81

of I.C. 31-1-3-2 Date of Application Effective July 1, 1977 FEMALE Medical Examination Report Dated MALE Name of Physician Sudmella Medical Examination Report Dated. ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "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 Ludmilla MALE APPLICANT Date of Birth Date of Birth Place of Birth (State or foreign country) Residence Address BOX County Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by:

Birth Certificate Judicial Decree Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree Other (Specify) Nruler's Occess 1. Are you now or have you ever been adjudged to be of unsound mind No E Yes D No Yes I. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? No Tes D No□ Yes□ If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease No Yes D Are you afflicted with a transmissible disease? 3. Are you related to the male applicant closer than second cousin 4. Are you now under the influence of intoxicating liquor Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug you now under the influence of a narcotic drug? 6. List the full names of any dependent children. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children? dependent children If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in 8. Full name of father_ Residence of father (if deceased so state) Residence of father (if deceased so state). Birthplace of father (State or foreign country) Birthplace of father (State or foreign country). Residence of mother (if deceased so state) Birthplace of mother (State or foreign country). Birthplace of mother (State or foreign country) State of Indiana, and state the information given application is true and correct. **HENDRICKS** HENDRICKS County of .. HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana. State of Indiana, County of. HENDRICKS County of. Signed .Father Signed. Subscribed and sworn to before me this Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the .. County. Court by written order issued. authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... HENDRICKS of Indiana dated the. , 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... one thousand nine hundred and ... State of Indiana, Groom Mask & Ollins were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Filed and recorded in accordance with the laws of the State of Indiana this.....

Official Designation

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

239

MALE Medical Examination Report Dated 5-26-81	FEMALE Date of Application
Name of Physician D. B. Haggard	
Name of Thysician 12 Avewenness 12	Medical Examination Report Dated 5 - 26-8
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whe shall be fined in any sum not exceeding five hundred dollars (\$500,000"	Name of Physician D. B. Hoggard
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT Middle	Il issuance of a license to marry by any false statement, representation or pretense
Name First Middle Last	None FEMALE APPLICANT
Date of Birth Month Day Year	Middle
Place of Birth (State or foreign country)	Date of Birth Month Day
Residence Address Street or R. R. City County	Place of Birth (State or foreign country)
Residence Address H 207 S. FUR Rd. Lake Worth	Residence Address
Previous Marital Status: Never Married OR	TACT S. KAD PA 9" County State
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married DOR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annual Divorce
R Other (Specify) Which,	Date of birth verified by: Birth Certificate Judicial Decree
and the state of t	Other (Specify) D. & Which.
If answer is "yes", has the adjudication been removed? No Yes No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No 💆 Yes 🗆	If answer is "yes", has the adjudication been removed?
Are you related to the female applicant closer than second cousin?	Are you afflicted with a transmissible disease?
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of the second cousin?
5. Are you now under the influence of a narcotic drug? No Yes No Yes	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No. 1 Yes 1
The state of the s	6. List the full names of any dependent children.
hyper Carl & South	Ryon Carl Brown
	ETHER SHARE WAS AND ASSESSED.
Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court and
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	7. Are you required by any court order or orders to support the above dependent children?
compliance with any court order or orders issued for their support	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Full name of father Wither K. Brown Sa.	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) Brown Mt. Jool,	8. Full name of father Roage D. Russell
Birthplace of father (State or foreign country)	Residence of father (if deceased so state) Blancon like
Full maiden name of mother Elizabeth, R. J. Ala.	Birthplace of father (State or foreign country)
Deri Cillad	9. Full maiden name of mother Janey & Danes
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Sudges, Sud
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
ate of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
	County of in this application is true and correct.
Signed al B Brown	Signed Neborah g. Kussell
New Address 4207 Stirt Rd. St. Worth Bla	New Address 4207 S. Trick Rd. Lake Worth
bscribed and sworn to before me this day of 1981.	Subscribed and sworn to before me this 27 day of 1989, 1981
Mory Jose Russel Clerk HENDRICKS Circuit Court	Many Jose Rosall Clerk HENDRICKS Circuit Court
NSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
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
s, state facts which render the consent of the other parent unnecessary.	signs, state facts which render the consent of the other parent unnecessary
e of Indiana,	
ty of HENDRICKS ss:	State of Indiana, County of HENDRICKS State of Indiana, HENDRICKS
	Father
Signed Father	Mother
Signed Mother	Signed
cribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this
Clerk	Clerk
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. HENDRICKS	t by written order issued and filed
County San Courty Court	t by written order issued
County authorizes and directs the issuance of a	a marriage needs to the transfer of the transf
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage license	10 authorizing the joining together as husband and wife
ndiana dated the day of day of	
further remembered, the following marriage certificate was filed in my office	
her to leave	reby certify that on the
housand nine hundred and Sl at.	County of Doubles County of Doubles
of Indiana, Groom Carl Brown of.	County State of House,
Bride Salah Russell of	Page Season Court of HENDRICKS
y me are in a fort the	the pair poor of
ty. d this day of, 19.51.	Signed Row Hallack
day of 19	11/1/10/201
and recorded in accordance with the laws of the State of Indiana this	ficial Designation , 19 5

APPLICATION FOR MARRIAGE LICENSE

240 42 File_ 2.98-81 Date of Application

... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR M.	MARRIAGE LICENSE File 42
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	S County Date of Application
	FEMALE Medical Examination Report Dated 5-26-81
MALE Medical Examination Report Dated 5-26-8	Name of Physician 8.8. Haggand
Medical Examination	Name of Physician
A CONTROLL OF THE LAST DEPOSITION ASSESSMENT OF THE PROPERTY O	ver procures the issuance of a license to marry by any taise statement, representation or pretense
shall be fined in any sum not exceeding the	
MALE APPLICANT	Name First Middle Last
Name Prist Edward Grenary	Date of Birth Month Day Year
Date of Birth Month Day	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	& Maron Dr. Douth Brownship
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married A OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: A Birth Certificate Judicial Decree	Date of birth vermed by
Other (Specify)	Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐ If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
If answer is "ves", has the adjudication been removed?	If answer is "yes", has the adjudication been removed. 2. Are you afflicted with a transmissible disease. No yes C
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No yes C
3. Are you related to the female applicant closer than second cousin? No A Yes No A	4. Are you now under the influence of intoxicating liquor? No Vy
4. Are you now under the influence of maxicating liquot.	5. Are you now under the influence of a narcotic drug? No Yes C
b. Are you now under the initiance of a marcotic drug.	6. List the full names of any dependent children.
6. List the full names of any dependent children.	
7.000 10 Kare	
	7. Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Dellie E. Branca	8. Full name of father Raymond E. Stassen
Residence of father (if deceased so state) Joseph Salum Salum	Residence of father (if deceased so state) Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Roslind One Brother	9. Full maiden name of mother Shirley K. Joslin
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Bas: I depose and state the information gives in this application is true and correct
	Les Pares 1 Mario
signed Imothy & Bramon	Signed Signed Signed
New Address 5 MANOR DRIVE SO B'DORG, IN	New Address S //) QUO (U1. 5. DEDUC
Subscribed and sworn to before me this 25 day of 1981.	Subscribed and sworn to before me this and day of they 196/
Malan Jane Russell Clerk HENDRICKS Circuit Court	Wary Jone Russell Gerk HENDRICKS Circuit Cour
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	Shake of Le Vi
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
SignedFather	r.it.
	SignedFathe
Subscribed and sworp to before me this	Signed Mother
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me thisday of
Clerk	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	T. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	T. A marriage license having been refused to the above named parties, the urt by written order issued
RETURN OF MARRY	f a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marriage li	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of day of	se issued by the clerk of the HENDRICKS Circuit Cour
The state of the s	10 hashand and wil
I was filed in my or	ffice, to-wit:
one thousand nine hundred and	hereby certify that
one thousand nine hundred and State of Indiana, Groom	at I I d
and Bride	of Honor County of
and a second	County State of
County County	County, State of
Dated this 3 day of , 19 8	HENDKICKS HENDKICKS
, 19 0	
Filed and recorded in	Signed Longlad Official Designation Wysters
Filed and recorded in accordance with the laws of the State of Indiana 41.	Official Designation Wisson

Dated this.

26

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

241

	The second	
File	42	Marie Cole

	County 5-28-81
MALE Medical Examination Report Dated 5-14-61	FEMALE Date of Application
Name of Physician D. M. Walker	Medical Examination Report Dated 5-14-81
Name of Physician	Name of Discourse Dated 5-14-81
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement - Who	Name of Physician D. M. Wolker
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who 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, representation or protonse
First Middle	
Dearge & &	Name First Middle
Date of Birth	Date of Birth Month
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 32
Residence Address Street or R. R. City County State	
you Sover Rd. Brownstry Dad	404 October Of R. R. City County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
D Other (Specify) & & J Pint	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	Other (Specify) D. & Specify
If answer is "yes", has the adjudication been removed? No Ves	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O
2. Are you afflicted with a transmissible disease? No 🗘 Yes 🗆	If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes D	3. Are you related to the male and
4. Are you now under the influence of intoxicating liquor? No. Yes Yes	4. Are you now under the influence of intoxicating liquor? No Yes No Yes
5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes D
	6. List the full names of any dependent children.
Aff Ball	None
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Warrage Q. Bogga	compliance with any court order or orders issued for their support. 8. Full name of father to the support of their support.
Residence of father (if deceased so state) Lian City Olio	
The state of the s	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother	9. Full maiden name of mother Sonar for Kollies
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Deceased
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of One
Signed Long E. Bogu	Signed X May A Malott
New Address 404 Stover Rd. Brownsburg IND	New Address 404 Wover full
Subscribed and sworn to before me this 28 day of May, 1981	Subscribed and sworn to before me this 28 day of May 1981.
Mar A HEVIDDICKS	Man Jane Russell Gerk HENDRICKS Circuit Court
Clerk Court	from from
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 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	signs, state facts which render the consent of the other parent unnecessary
oute facts which render the consent of the other parent unnecessary	
*	
State of Indiana,	State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of
SignedFather	Signed
Signed Mother	Signed Mother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
	hean 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
HENDRICKS County Co	ourt by written order issued
authorizes and directs the issuance of	
TARRIAGE LICENS	E AND MARKIAGE CERT HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
Indiana Jak 1 11	
	714
Be it further remembered, the following marriage certificate was filed in my o	day of day of
one thousand one Russell	at State of
State of Indiana, Groom Season E. Sogel	at Herd County, State of In
State of Indiana, Groom Seorge E. Cogel and, Bride Of Of	of County, State of HENDRICKS
were by me unital.	that purpose by the Clerk of the Circuit Court of
County.	N 1 2 12

Official Designation ...

..Clerk

Circuit Court

APPLICATION FOR MARRIAGE LICENSE

5-28-81

Form Prescribed By	TION FOR MA	ARRIAGE LICENSE	File 42
Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of Application
		FEMALE Medical Examination Report Da	ted 5-22-81
MALE Medical Examination Report Dated 5-22-8/		Name of Physician.	M. Hadle.
MALE Medical Examination Report Dated 5-22-8/ Name of Physician D. Hadley		Name of Physician	1 1/100000
The structure of the state of the structure of the struct	False statement—Whoever	r procures the issuance of a license to marry t	by any raise statement, representation or pretens
shall be fined in any sum not exceeding inv		FEMALE	APPLICANT
MALE APPLICANT		Name First	Middle . Last
Name First Middle	ndorson fr	Date of Birth Month	Day Year Year
Date of Birth Months Day	1955	Place of Birth (State or foreign country)	25 57
Place of Birth (State or foreign country)		Sedence	City County State
Residence Address Street of R. R. City County	State	Residence Address Street or R. R.	Pelfel., Sed. 46168
6/6 Honly St Flangue		Previous Marital Status: Never Married OR	
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce	Annulment
Last Marriage Ended By: Death Divorce Annualment Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	
		Other (Specify)	· Jaig ICV
Other (Specify) Drivas Lee W/ Pie	No Ves 🗆	1. Are you now or have you ever been adjudged to	
1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No □ Yes □	If answer is "yes", has the adjudication been rer	moved? No □ Yes □
Are you afflicted with a transmissible disease?		2. Are you afflicted with a transmissible disease?	No ₹ Yes C
3. Are you related to the female applicant closer than second cousin?		3. Are you related to the male applicant closer tha	
4. Are you now under the influence of intoxicating liquor?		4. Are you now under the influence of intoxicating5. Are you now under the influence of a narcotic d	
5. Are you now under the influence of a narcotic drug?		6. List the full names of any dependent children.	
6. List the full names of any dependent children.		Ginnife refinage	D. C.
		1000	
		7. Are you required by any court order or orders t	to support the shove
7. Are you required by any court order or orders to support the above dependent children?	No □ Yes □	dependent children?	No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactor	y proof that you are in		ation be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.		compliance with any court order or orders issue	d for their support.
8. Full name of father June P. William Sy		8. Full name of father Party	200
Residence of father (if deceased so state)		Residence of father (if deceased so state)	(50,00)
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Service C
9. Full maiden name of mother Kantona Maxine Auffen	<u> </u>	9. Full maiden name of mother	The y Hamsen
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	Dure
Birthplace of mother (State or foreign country) & notioned		Birthplace of mother (State or foreign country)	Del.
State of Indiana, County of HENDRICKS ss: I depose and state the in this application is	true and correct	State of Indiana, County of HENDRICKS	sa: I depose and state the information given in this application is true and correct
Signed Frank P. ancher		V	16 1 m: 1
New Address		Signed X	kh of Marick
Subscribed and sworn to before me this day of	10.8/	New Address 6/6	
May Your Russell Clerk HENDRICKS	2	Subscribed and sworn to before me this.	
Clerk	Circuit Court	Mose Jone Knowl	Clerk HENDRICKS Circuit Cour
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GU	JARDIAN
We, the parents, of this applicant hereby give consent for this marriage.		We, the parents, of this applicant hereby give	
signs, state facts which render the consent of the other parent unnecessar		signs, state facts which render the consent of	
State of Indiana,			
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	S8:
Signed		,	T about
Signed		Signed	Father
Subscribed and sworn to before me thisday of	Mother	Signed	
	, 19	Subscribed and sworn to before me this	day of
COMPLETE IN MARKET	Clerk		Cleri
COMPLETE IF MARRIAGE LICENSE ISSUED BY OR HENDRICKS County	DER OF COURT.	A marriage license having been red	fused to the above named parties, the
in	Court	t by written order issued	and filed
direction of the second of the	ects the issuance of a	marriage license to the above named	l parties.
Be It Remembered, there was filed in my office	RIAGE LICENSE	AND MARRIAGE CERTIFICATE	
Ot Indiana Jaka Jul	a diccinat	18811PA Du the alanle tul	HENDRICKS Circuit Court
Be it further remembered the following		1981, authorizing the	joining together as husband and wife
on the following marriage certificate	ana ci i i	WILL TILLING	V C K
one thousand in the	her	cebu contis	day of June
State of Indiana, Groom Scank & Hoders	at.	Planfield	County of Herdricks
State of Indiana, Groom Stank & Andersa and, Bride Were by me united in marriage as and	ofof	Herdricks c	County, State of
County as authorized by a marriage l	li accesi	1/endricks	County, State of
were by me united in marriage as authorized by a marriage l County. Dated this day of JWW	Society for tha	tt purpose by the Clerk of the Circuit	Court of HENDRICKS
	, 19	0 11	

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

Official Designation.

Signed ..

HENDRICKS

... Circuit Court

.Clerk

..Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of IC 31 1-3 2 Effective July 1 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 243

HENDRIC	KS File 42
MALE	
Medical Examination Report Dated 5 -26 -81	FEMALE Date of Application
Name of Physician Drumell	Medical Examination Report Dated 5-26-81
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement, Wa	Name of Physician Over procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	pever procures the issuance of a license to marry by any false statement, ropresent all
Name Middle	
Date of Birth Month Day Year	Name First Middle
Place of Birth (State or faceign country)	Date of Birth Month
and the second s	Place of Birth (State or fereign country) Day Year Place of Birth (State or fereign country)
Residence Address Street or R. R. City County State	Paris
Previous Marital Status. Never Married Q OR	City County State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Appulment D
& Other (Specify) D. A. W. Risk.	Date of birth verified by: Birth Certificate Judicial Decree
	4 Other (Specify) D. J. W/ peit
7 1es 0	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes" has the adjudication been removed? No Yes C 2. Are you afflicted with a trunsmissible disease.	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes D	- Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Y Yes D	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No Yes No Yes
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No A Yes 6. List the full names of any dependent children.
	and dependent entitieren.
7. Are you required by any court order or orders to support the above	
dependent children' No D Yes D	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father CANAL COURT	compliance with any court order or orders issued for their support.
Residence of father (if decreased so state)	8. Full name of father Rolph Worskom
	Residence of father (if deceased so state) boto soil a like
Birthplace of father (State or foreign country) Led plo . D. d.	Birthplace of father (State or foreign country)
9. Full maiden name of mother Colinea Cook	9. Full maiden name of mother James Johnson
Residence of mother (if decreased so state)	Residence of mother (if deceased so state)
Birthplace of mother i State or foreign country and a second and	Birthplace of mother (State or foreign country)
State of Indiana.	Charte of Tadione
County of HENDRICKS as: in this application is true and correct.	County of HENDRICKS I depose and state the information given in this application is true and correct.
Signed x mi I moin	Signed & Laure Waskom
New Address 1007 VALLEY VIEWI PLAINFIELD	New Address/007 Valley View Plainfield
Subscribed and sworn to before me this 25 day of May 1981.	Subscribed and sworn to before me this. 25 day of May, 1981.
Mary Jan Readly HENDRICKS	Many Jose Russel Clerk HENDRICKS Circuit Court
Clerk Circuit Court	the same 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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS } ss:	State of Indiana, HENDRICKS ss:
County of HENDRICKS	County of Father
Signed	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
COMPA	The serving license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license liarning and filed art by written order issued
in County	art by written order issued in the above named parties.
authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage ticens	1987, authorizing the joining together as husband and wife
of Indiana dated the 2 day of June	Down & Washom
Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit:
1, A and h	ereby certify that on the day of County of County of
thousand nine hundred and	County, State of
State of Indiana, Groom David C. Main	
and, Bride Down E Wisk and of	1 - W
were by me united in marriage as authorized by a marriage license issued for to County.	hat purpose by the Clerk of the
Dated this) Di Diau
Dated this day of Que , 1981	Signed 0

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

..... Circuit Court

HENDRICKS

244

	FEMALE Medical Examination Report Dated 5-27-8
MALE Medical Examination Report Dated	D-6+ (1) 100
	Name of Physician Tolor C. Warra
Name of Physician A D D D D D D D D D D D D D D D D D D	ever procures the issuance of a license to marry by any false statement, representation or pretens
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle World
Name River Middle Armour	ane II. The
Date of Birth Month Day Go	Date of Birth Q4 1963
Place of Birth (State on fogener country)	Place of Birth (State or foreign country)
County State	Residence Address Street dr R. R. City County County State
Residence Address Street or R. R. 23 lo 6 Employee Plat (Residence Address Street or R. R. R. R. R. Plat (Residence Address Street or R. R. R. R. R. Plat (Residence Address Street or R.	RIZ 2 130x43 Danuelle De Dro
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by:
	Other (Specify)
Other (Specify)	1. Are you now or have you ever been adjudged to be of unsound mind? No Ves U
1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No Ves
1. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Ves O
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No WYes D
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Yes U
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes O
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	7. Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children? No Yes	dependent children? No Ves C
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Dale Comous	8. Full name of father Tombos Tombos Tombos
Residence of father (if deceased so state) Clayton Incl.	Residence of father (if deceased so state) Lawle Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Crowfordsuille Ind.
9. Full maiden name of mother Holen on Burnett	his my Roads
m to	9. Full maiden name of mother Appendix
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
S PA DO	County of TILINDRICKS In this application is true and correct.
Signed Silver L. Change	Signed & Dave M. Michael
New Address 2366 & Main Flfd.	New Address 23 (d/o E Man Puld.
Subscribed and sworn to before me this day of 1981	Subscribed and sworn to before me this 29 day of 19.81.
Mary ma females HENDRICKS	
Circuit Court	Wary Jane Russellerk HENDRICKS OFFCUIT 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 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
the concert of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary.
State of Indiana,	Steel at N
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed	
	Signed Father
Subscribed and sworn to before we this	Signed Mother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of19
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ARRIVED	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	. A marriage license having been refused to the above named parties, the
in	art by written order issued and filed
the Issuance of	a marriage license to the above named parties
Be It Remembered, there was filed in my office a marriage license	AND MARRIAGE CERTIFICATE
0 [mdiana] 1 1 1 1	C tobuled by the cloud. the
Tallon 1	to C
marriage certificate was filed in marriage	TUTILO
1, Dr Joseph D Stump	ice, to-wit:
one thousand nine hundred and S	ereby certify that on the Say of June
State of Indiana, Groom Steven Dale Armour and, Bride Jone A. M. Intire of were by me united in marriage as authorized.	t Langelle day of June, County of Hand,
and printer than the	County State of Ind
County as authorized by a marriage ligence in	Hend County, State of Ind. County, State of Ind. County, State of Ind.
County. Dated this day of June	at purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of June, 1981	
	Signed Dr. Joseph D. Stump
Filed and recorded in accordance with the laws of the State of Indian	ficial Designation Myster

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

File_

MALE 70.91	5-29-81
Medical Examination Report Dated	FEMALE Date of Application
Name of Physician Douis M. Hadley	Medical Examination Report Dated 5-28-81
TOTAL TOTAL STREET, AND AND ASSESSED AND ASSESSED ASSESSE	Name of Physician Aduin M. Xndl.
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by
MALE APPLICANT	to marry by any false statement, representation or pretense
Name First Middle Last	Name FEMALE APPLICANT
Date of Birth North Day Year	Middle Middle
Place of Birth (State or foreign country)	Date of Birth Month Day
11011000	Place of Birth (State or foreign country)
Residence Address Street or R. R. Stity County State	Resident
1 miles Mellon	Street of R. R. City Sounty State
Previous Marital Status: Never Married OVOR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate U Judicial Decree
1 Other (Specify) # 95376	
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) # 251/
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No Yes
3. Are you related to the female applicant closer than second cousin?	2. Are you releted to the attansmissible disease? No Yes
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No. Yes.
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a paractic dama?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court orders issued for their support.
8. Full name of father taymend Friedrick Nammons	8. Full name of father Rary Rhoy Hydoll
Residence of father (if deceased so state) Plannlila, Mad,	Residence of father (if deceased so state) TO 1 S. Unitar Mainfield In
· Unalia ua	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother All Maria all Mulia	9. Full maiden name of mother Jacqueline ann Komsey
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	· Cadia
State of Ladinary	Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given
County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Ilian of france	V 4 1 2 1 1 1 1
Signed Signed FADRES	Signed A Dece X Hy Guell
New Address 10333DWINGATE 6/00 ID	New Address 10335 SWINGAKE
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS Circuit Court
Office 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 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
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,	Chata of Indiana
County of HENDRICKS ss:	State of Indiana, HENDRICKS Ss:
	Signed Father
Signed Father	
Signed	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
	Clerk
Clerk	Market State of the second
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
TENDRICKS Co.	art by written order issued
n	f a marriage license to the above named parties.
authorizes and directs the issuance of	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licen	Se issued by the clerk of the
Indiana de la	se issued by the clerk of the
f Indiana dated the day of day of	Low L. Hydell
Be it further remembered, the following marriage certificate was filed in my of	Tice, to-wit:
Teffery A Trope	
ne thousand nine hundred and	thereby certify that one of the country of the coun
tate of Indiana, Groom Longs J. Hammons	County, State of The
	County, State of HENDRICKS A transpose by the Clerk of the Circuit Court of HENDRICKS
Pere by me united in marriage as authorized by a marriage license issued for touty.	hat purpose by the Clerk of the Circuit Court of
	TOO ATLACE
Pated this day of June 1981	Signed Jeffer H. 11883
	Official Designation Pastol 1981
iled and recorded in accordance with the laws of the State of Indiana this	Mary Jane HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

No	246
File	
Me	20/1501

Health under Authority	MARRIAGE LICENSE KS County File June 1/98/
of I.C. 31-1-3-2 Effective July 1, 1977	p are of Application
	FEMALE Medical Examination Report Dated
MALE Medical Examination Report Dated May 2/1/88/ Name of Physician & Maso Mann	Name of Physician May 28/581-K. Deasy
Name of Physician J. Mose mann	never procures the issuance of a license to marry to any false statement, representation or proteinse
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement" with shall be fined in any sum not exceeding five hundred dollars (8500.00)"	FEMALE APPLICANT
MALE APPLICANT	Name For 1. Oh Middle Rich Land
Name First Middle Lucky	Date of Birth Mouth Day Year
Date of Birth Month Day	Place of Birth (State of toreign country)
Place of Birth (State or foreign country) State Street or R. R. City County State	Residence Address Street or R R City County State
Residence Address Street or R. R. City Dunge Ind.	Previous Marital Status Never Married O OR
Previous Marital Status: Never Married OR	Last Marriage Ended By Death D Divarce Annulment D
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate D Judicial Decree
	Other (Specify)
Other (Specify) No Yes 1. Are you now or have you ever been adjudged to be of unsound mind?	1 Are you now or have you ever been adjudged to be of unsound mind? No W Yes O If answer is "yes" has the adjudication been removed. No W Yes O
If answer is "yes", has the adjudication been removed?	If answer is "yes" has the adjudication been removed. No D Yes D Are you afflicted with a transmissible disease. No D Yes D
Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin? No ✓ Yes ✓	3 Are you related to the male applicant closer than second cousin' No E Yes D
4. Are you now under the influence of intoxicating liquor? No D Yes D	4 Are you now under the influence of intoxicating liquor? No D Yes D 5 Are you now under the influence of a narostic drug? No D Yes D
5. Are you now under the influence of a harcotic drug.	6 List the full names of any dependent children
6. List the full names of any dependent children.	
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	Are you required by any court order or orders to support the above dependent children." No D Yes D
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Walley Woole Yulky	* Full name of father Landel Wayne Buderell,
Residence of father (if deceased so state) Orchoro Androro	Residence of father (if decouned so clairs Indian apolis, In
Birthplace of father (State or foreign gountry) Indiana	Birthplace of father (State or foreign country) OK fathorna
9. Full maiden name of mother_Marolyn Junila Busich	4 Full marden name of mother Storing Sice Fuller
Residence of mother (if deceased so state) Orlgons, Indiana	Residence of mother (if decreased so states Indianapolis, fre
Birthplace of mother (State or foreign country) Andling	Birthplace of mother i State or foreign country's OH School
State of Indiana, County of HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana. County of HENDRICKS as: I depose and state the information given in this application is true and correct.
Signed Marris & Guoly	siems Thear of Bridge P
New Address P#3 Online 1 Indio 1 d	Now Address Rackla # 2 Oslanas Ind
Subscribed and sworn to before me this day of June 198/.	Subscribed and sworn to before me this
Mory Jone Russell Gerk HENDRICKS Circuit Court	Many Jone Rusself Over HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF REPORT PROPERTY OF STREET
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	signs, state facts which render the consent of the other parent unnecessary
	CONTROL OF THE PROPERTY OF THE
State of Indiana, County of HENDRICKS 888:	State of Indiana. County of HENDRICKS
Signed	
Signed Mother	Signed Father Mother
Subscribed and sworn to before me this day of 19	Subsect
Clerk	Ourseribed and sworn to before me this day of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COM	RT. 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 LICENS of Indiana dated the	
of Indiana dated the	ense issued by the clerk of the HENDRICKS Circuit Court
Be it further remembered, the following marriage certificate was filed in my	and Shell, authorizing the joining together as husband and with
State of Indiana, Groom	at to
and, Bride Sholly Lynne Bride	of Drange County of Ind
County me united in marriage as authorized by a marriage license	County, State of
Dated this day of June, 198	that purpose by the Clerk of the Circuit Court of HENDRICKS
	Signed Barnard C Tackson
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
That State of Indiana this	
	Signed 1 10 2 500 Russell HENDRICKS Circuit Court

Dated this.

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Effective July 1, 1977 HENDRICKS County MALE 5-23-81 Medical Examination Report Dated_ Date of Application FEMALE Name of Physician Michael Meel Medical Examination Report Dated 5-23-81 Name of Physician Michael Noelle ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT Previous Marital Status: Never Married OR Last Marriage Ended By. Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce Annulment □ Date of birth verified by:

Birth Certificate

Judicial Decree If answer is "yes", has the adjudication been removed? No Yes If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease Are you related to the male applicant closer than second of Are you now under the influence of intoxicating liquo Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children 7. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children No T Yes No Yes D dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in State of Indiana, HENDRICKS Beach on Monticella, In 4 7960 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 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 signs, state facts which render the consent of the other parent unnecessary... State of Indiana, HENDRICKS State of Indiana, HENDRICKS County 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 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. , 19. , authorizing the joining together as husband and wife of Indiana dated the. Hinteman Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the one thousand nine hundred andCounty, State of County, State of State of Indiana, Groom Charles A Hend and, Bride Kothleen M were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County.

Official Designation

.Clerk

Circuit Court

APPLICATION FOR MARRIAGE LICENSE

... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority	OR MARRIAGE LICENSE NDRICKS County Pate of Application
of I.C. 31-1-3-2 Effective July 1, 1977	Date of Application
	FEMALE Medical Examination Report Dated 5-16-81
MALE Medical Examination Report Dated 5-16-81	Want of the officer
	Name of Physician
Name of Physician 707 10 21 L26 prescribed "False statement	nt-Whoever procures the issuance of a license to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding	FEMALE APPLICANT
MALE APPLICANT	Name First Migdle Last
Name Prohasel Migdle Bullero	Date of Birth Month Day Year
Date of Birth Month Day	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 Comty State T84 Shadey Crock Grandbad Johnson	and Residence All Box 248 Inolphs Hend. Ind
1010000	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment O	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate - Button Detect
	Other(Specify)
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? Now Y	
No U Y	
2. Are you afflicted with a transmissible disease?	The state of the s
3. Are you related to the female applicant closer than second cousin? No Y	
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug?	Yes □ 5. Are you now under the influence of a narcotic drug? No Yes □
100	6. List the full names of any dependent children.
Gacob Clizat Bullers - Not Dependent-	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you a compliance with any confer or orders issued for their support.	compliance with any court order or orders issued for their support
8. Full name of father Robert Winton Bullers	8. Full name of father Hapley Vestel Sweet
Residence of father (if deceased so state) I Pan Klin Ind.	Residence of father (if deceased so state) Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Oakley Idaho	Birthplace of father (State or foreign country) Centucky
9. Full maiden name of mother Elizabeth Jacobs	9. Full maiden name of mother Juliana Relies
Residence of mother (if deceased so state) Roon wood Ind.	Residence of mother (if deceased so state) Plfd. Ind.
Birthplace of mother (State or foreign country) Newark, Ohio	
	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given
County of HENDRICKS ss: I depose and state the information of in this application is true and cor	County of HENDRICKS ss: in this application is true and correct
Signed Lichard T. Bullows	Signed X about & Susset
New Address R. R. J. Municola An 416	8.164 New Address BRI Would on allell
Subscribed and sworn to before me this day of 19	Subscribed and sworm to before me this day of tune 198
Wary Jane Russellerk HENDRICKS Circuit	Court Mary and Dussellerk HENDRICKS Circuit Cour
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 parents, of this applicant hereby give consent for this marriage.	and the state of the supplication in the state of the sta
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, Country of HENDRICKS ss:	State of Indiana,
County of HENDRICKS	County of HENDRICKS
Signed Fr	ather Signed Father
Signed M	Mother Signal Moth
Subscribed and sworn to before me thisday of, 19	9 Subscribed and sworn to before me this
	day of da
HENDRICKS COUNTY	COURT. A marriage license having been refused to the above named parties, the
in authorizes and direct the	COURT. A marriage license having been refused to the above named parties, to court by written order issued and file
and directs the issi	suance of a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marria	ICENSE AND MARRIAGE CERTIFICATE
of Indiana dated the	ge ticense issued by the clerk of the HENDRICKS Circuit Cou
1, was filed i	in my office, to-wit:
one thousand nine hand.	
State of Indiana, Groom.	Country of
To a comment of the state of th	County State of
County and the marriage as authorized by a marriage ligense.	County, State of
Dated this day of ,	ted for that purpose by the Clerk of the Circuit Court of HENDRICKS
June ,	19.01
	Stoned la
Filed and recorded in accordance with the laws of the State of Indiana	Official Designation this

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of 1C 31 1-3-2

APPLICATION FOR MARRIA

249

effective July 1 1977 HENDRICKS File			
	County		
MALE Medical Examination Report Dated 5-24-81	FEMALE Date of Application		
Name of Physician Malcolm Scama Amal	Medical Examination Report Dated 5-24-81		
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 pps://doi.org/10.100/	Name of Physician M Clouden Jan 1		
shall be fined in any sum not exceeding five hundred dollars (8500,00).	Name of Physician M Classelms Scama konst		
Name Prest Mindle			
Date of Birth Month Day Wristel	Name First		
Place of Birth State or foreign country)	Date of Birth Month Pence Brugge Last		
Adjanapoles In.	Place of Birth (State of foreign country) Day Year 196.2		
Residence Address Street or R. R. Pettsbow County State	Residence Address Street or P. O.		
Previous Marital Status. Never Married OR	T. V. Boy 233 Vittshow 9.00.		
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR		
Date of birth verified by Birth Certificate U Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree		
Other (Specify)			
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes" has the adjudication been removed?	1. Are you now or have you ever been added.		
2. Are you afflicted with a transmissible disease? No Yes No Yes	If answer is "yes", has the adjudication been removed?		
3. Are you related to the female applicant closer than second cousin? No Yes D	2. Are you afflicted with a transmissible disease?		
4. Are you now under the influence of intoxicating liquor? No B Yes D	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No □ Yes □		
Are you now under the intruence of a narcotic drug? No Yes	5. Are you now under the influence of a narcotic drug?		
	6. List the full names of any dependent children.		
7 Are you required by any court order or orders to support the above			
dependent children" No U Yes U If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐		
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in		
8. Full name of father group of ger Christiel	compliance with any court order or orders issued for their support. 8. Full name of father area of the Brune		
Residence of father (if deceased so state) Agne	Residence of father (if deceased so state) Same		
Birthplace of father (State or foreign country) Indiana	Birthplace of father (State or foreign country) Indlana		
9. Full maiden name of mother Sugar Gran Fence	9. Full maiden name of mother Llenda J. Johnson		
Residence of mother (if decreased so state) Same	Residence of mother (if deceased so state)		
Birthplace of mother i State or foreign country) State of Indiana.	Birthplace of mother (State or foreign country) Indiana		
County of HENDRICKS as: 1 depose and state the information given this application is true and correct.	State of Indiana, HENDRICKS 88: I depose and state the information given in this application is true and correct.		
Signed Jan Christie	Line R. Bruce		
New Address POBX 98 Liston IN 46/49	New Address P.O. Box 98 Suylar Uni		
Subscribed and sween to before me this 2nd day of June 1981.	Subscribed and sworn to before me this 2md day of June		
Mary Jane Russell Clerk HENDRICKS Circuit Court	Mary Jane Russellderk HENDRICKS		
	7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
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 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 or signs, state facts which render the consent of the other parent unnecessary		
the consent of the other parent unnecessary	signs, state acco		
State of Indiana,	State of Indiana,		
County of HENDRICKS	State of Indiana, HENDRICKS County of		
Signed Father	Signed		
Signed Mother	Signed & Dlenda J. Bruce		
Subscribed and sworn to before me this day of	Subscribed and sworn to before me this day of		
Clerk	1 May January		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the		
MENDRICKS County Col	art by written order issued		
authorizes and directs the issuance of	f a marriage license to the above named partition		
Be It Remembered, there was filed in my office a marriage licens	C AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court		
Be it further remembered, the following marriage certificate was filed in my office a marriage licens day of the state of Indiana dated the day of Indiana day of Indiana dated the day of Indiana day of Indiana day of Indiana	, 19 % authorizing the joining together as husband and wife		
Beil C. JAY ALAN CHRISTIE	d LISA RENEE BRUCE		
Be it further remembered, the following marriage certificate was filed in my of l,WILLIAM CHARLES MCGRAW h	ereby certify that on the day of HENDRICKS		
thousand nine book 1	TNDIANA		
Indiana, Groom JAY ALAN CHRISTIE	County State of		
State of Indiana, Groom JAY ALAN CHRISTIE and, Bride LISA RENEE BRUCE	HENDRICKS HENDRICKS HENDRICKS		
County.			
01	TO MCGRAW		
Filed and recorded in accordance with the laws of the State of Indiana this	29 day of June Clerk Signed MARY JANE RUSSELL HENDRICKS Circuit Court		
	Signed HENDRICKS Circuit Court		

Signed ..

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31 1-3-2 Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County 249

No	X	77	N.	
File				
		140	the same	

MALE	
Medical Examination Report Dated	5-24-81
Name of Physician Malcolm	Scama hours
OUESTIONS MUST BE ANSWERED. LC	

Date of Application

Medical Examination Report Dated 5-24-81	FEMALE Date of Application
Name of Physician Malcolm Scama form	Medical Examination Report Dated 5-24-81
ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed #Pot	Name of Physician M alas m Scama form
ALL QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement—W hall be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT	hoever procures the issuance of a license to marry by any file
MALE APPLICANT	assume of a license to marry by any false statement several

shall be fined in any sum not exceeding five hundred dollars (\$500,000". MALE APPLICANT	oever procures the issuance of a license to marry by any false statement, representation or pretense
Name A Last	FEMALE ADDITION
Date of Birth Month Day Aristie	Name First , Middle
Place of Birth State or foreign country)	Date of Birth Month Hence Bruce
Andianapoles In.	Place of Birth (State of foreign country) Place of Birth (State of foreign country) Year 1963
Residence Address Street or R. R. Pittsbury County State	Residence Address Wanvelle m.
Previous Marital Status Never Married OR	Street or R. R. City County State
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Appulation D
	Date of birth verified by: Birth Certificate Judicial Decree
Other(Specify)	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No D Yes D If answer is "yes" has the adjudication been removed?	1. Are you now or have your and
No U Yes D	If answer is "yes" has the adjud:
2. Are you related to the female applicant closer than second cousin? No Yes O Yes O	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes U	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Pes D	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes No Yes
	any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children? No□ Yes□	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Willy A fee Arms Tight	compliance with any court order or orders issued for their support
Residence of father of deceased so state) James	8. Full name of father James R. Bucce
	Residence of father (if deceased so state) Same
Birthplace of father (State or foreign country) Malana	Birthplace of father (State or foreign country) Audionia
9. Full maiden name of mother fuger from Tence	9. Full maiden name of mother Llenda J. Johnson
Residence of mother (if deceased so state) Same	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country) Indiana
State of Indiana. State of Indiana. State of Indiana. I depose and state the information given the application is true and correct.	State of Indiana
County of PENDRICKS in this application is true and correct.	County of HENDRICKS sa: I depose and state the information given in this application is true and correct.
Signed Juy Knotic	Signed Sisa R. Bruce
CONSENT OF PARENTS We the parents of this is signs, state facts which remarry Jay 9. Christians. State of Indiana. County of HENC Signed	hereby give my consent for a R. Bruce to sistie Y Junes R. Bruce efore me this 8 day of June 1981
ubscribed and sworn to t Mary Commission Expension 30, 1985	Notary Public Notary Public
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	and filed a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	e issued by the clerk of the
Be It Remembered, there was filed in my office a marriage license Indiana dated the day of	, 19, authorizing the joining together as husband and wife
JAY ALAN CHRISTIE	d LISA RENEE BROCE
Indiana dated the	ereby certify that on the HENDRICKS
TO THE CHARMES HAS AND	t PITISBORO , County of
tate of Indiana, Groom JAY ALAN CHRISTIE	HENDRICKS County, State of INDIANA
tate of Indiana, Groom JAY ALAN CHRISTIE of and, Bride LISA RENEE BRUCE of the series by me with the series is sued for the	HENDRICKS County, State of HENDRICKS
ere by me united in marriage as authorized by a marriage license issued for thounty.	at purpose by the Clerk of the Circuit Court of
ounty ounty	
ated 41:	WILLTAM CHARLES MCGRAW
0	MINISIER
iled and recorded in accordance with the laws of the State of Indiana this	29 day of June Clerk
and recorded in accordance with the laws of the State of Indiana thomas	MARY JANE ROSS HENDRICKS Circuit Court

Signed ..

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

File	1	
9	Leno 4 KE1	
77	Data of Andi	_
V	Date of Applicatio	n

.. Circuit Court

	FEMALE Medical Examination Report Dated 6-3-8/		
MALE Medical Examination Report Dated MALE Medical Examination Report Dated MALE Medical Examination Report Dated	Name of Physician M. E. M. Clive		
Name of Physician M.E. M.C. Clure	the issuance of a license to marry by any false statement, representation or		
Name of Physician M.E. Mc (Luve ALL QUESTIONS MUST BE ANSWERED, L.C. 31-1-3-6 prescribed "False statement—Whoe ALL QUESTIONS must part exceeding five hundred dollars (\$500,00)".	ver procures the issuance of a second precesse		
ALL QUESTIONS MUST BE ANSWERED. IC. 31 190 of (\$500,00)". shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Fireb Middle // lost		
Middle / Last	Jammy Lee Holloway		
Name William Day Year	Date of Birth Opril 24 1963		
Date of Birth Month 30 /961	Place of Birth (State or threign country) Andione		
Place of Birth (State or foreign country) Incline of Birth (State or foreign country)	Residence Address Street of R. R. Planniell Sunty State		
Residence Address Street of R. M. Desnield Ind.	500 0000		
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment		
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree		
Date of birth verified by: Birth Certificate Judicial Decree			
Other (Specify)	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No V Yes		
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes \(\text{No} \text{ Yes} \)	1. Are you now or have you ever been adjudged to the state of the stat		
If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease. No Yes \(\sigma\)		
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No Ves D		
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No yes		
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Vyes O		
6. List the full names of any dependent children.	6. List the full names of any dependent children.		
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No□ Yes□		
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in		
compliance with any coupt order or orders issued for their support.	compliance with any court order or orders issued for their support.		
8. Full name of father Harrison D. Angle			
Residence of father (if deceased so state) Planfield, Indiana	Residence of father (if deceased so state) Amonfield, Audiona		
Birthplace of father (State or foreign country) Andleana	Birthplace of father (State or foreign country)		
9. Full maiden name of mother Donna S. Esterbrooks	9. Full maiden name of mother June J. Lunavon		
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Plainfield, Indiona		
Birthplace of mother (State or foreign country) Androna	Birthplace of mother (State or foreign country) Using Only		
State of Indiana.	State of Indiana, HENDRICKS Max: I depose and state the information gives in this application is true and correct in this application is true and correct.		
County of	County of		
Signed William D. Ingle	Signed lammy tolloway		
New Address 5/0 Avar Rd	New Address 5/0 Clean Kd.		
Subscribed and sworn to before me this day of Jenue , 198 (Subscribed and sworn to before me this day of June , 198/		
Mary York Russell Clerk HENDRICKS Circuit Court	Mary Jone Russell Clerk HENDRICKS Circuit Cour		
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 parent	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	signs, state facts which render the consent of the other parent unnecessary		
State of Indiana, County of HENDRICKS } ss:	State of Indiana,		
	County of HENDRICKS		
Signed Father	SignedFathe		
Signed Mother	Signed Mother		
Subscribed and sworn to before me thisday of19	Subscribed and sworn to before me this day of ,19		
Clerk	Cler		
HENDRICKS County	RT. A marriage license having been refused to the above named parties, the		
in Superior # 2 James Harris authorizes and directs the issues	Court by written order issued 3 ly Waster and file		
in Juffering Towns davies and directs the issuance			
	SE AND MARRIAGE CERTIFICATE tense issued by the clerk of the HENDRICKS Circuit Countries.		
	to hand and wil		
Be it further remembered, the following marriage certificate was filed in my	and and authorizing the joining together as husband		
I,	hereby certify that on the day of		
State of Indiana C	10 1 kg at 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
and, Bride	County, State of		
County were by me united in marriage as authorized by a marriage license in the	County, State of		
Dated this day of 19	but pose by the Clerk of the Circuit Court of		
, 19	Signed William & Fisher		
Filed and recorded in accordance with	Official Designation		
Filed and recorded in accordance with the laws of the State of Indiana this	day of June 9 ,1981		

Form Prescri Indiana State Health under	Distinct or
of I.C. 31-1-3- Effective July	2

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

251

WALE	County 6-4-81
MALE Medical Examination Report Dated 6-2-8/	FEMALE Date of Application
Name of Physician U. M. Ssudder	Medical Examination Report Dated 6-3-8/
ALL OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed and	
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	pever procures the issuance of a license to marry by any false statement
Privat MC131	
James R. Ilpaus	Name FEMALE APPLICANT
Date of Birth Day Lear 1941	Date of Birth Worth Solution
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 1953
Residence Address Street or R. R. City County State	Residence Add
334 Emery up. 9) From Rang Dend, Chal.	534 Endely Cat. 4 Record City County States
Previous Marital Status. Never Married OR Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
A in the Paris I de la	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Weeks W picture	& Other (Specify) Military I.D
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjugged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?	If answer is "yes" has the adjudication
2. Assume related to the female applicant along the	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No. Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No. Yes No. Yes
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.
James K. Warren Jr. 12 year.	Daniel Willow 7 7 Mil
Wm. S. Warren 10 Eyes	Christi dal 14
Jamie M. Waynen 8 grs	may senute 4 yrs.
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Caul Hasil Wayer	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) 328 No Jefferson Brownshu	8. Full name of father WM. Henry Smith
	g Sussidence of father (if deceased so state) 14 Mulphy Cf., Survey)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Charles Mulle Ve Pong	9. Full maiden name of mother Mulotte Elyabeth Cutte
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Unlluna	Birthplace of mother (State or foreign country) Indiana
State of Indiana. County of HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS State of Indiana, HENDRICKS State of Indiana, HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
200	County of HENDRICKS ss. in this application is true and correct.
Signed of ames a. Marren	Signed & Deloral J. Schutte
New Address 534 Enduly Dapt 4	New Address 534 Enderly Us apt 4
Subscribed and sworn to before me this	Subscribed and sworn to before me his day of 1991.
Mey bu Russell Clerk HENDRICKS Circuit Court	Why Jane Kewsell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of
Signed	SignedFather
Signed Mother	Signed Mother
	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of	Subscribed and Subscribed Clerk
	1. the share payed payties the
COMPLETE IF MARRIAGE LICENSE ISSUED, BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS County Sugarior #/ (Pro-Jampou	irt by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Superior +/ (Pro-Jung) ou in Clerk's Office 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	e issued by the clerk of the
of Indiana dated the	Sol Ho
Be it further remembered, the following marriage certificate was filed in my off	fice, to-wit:
he Rev Ton P . Font	ereby certify that on the aday of Marion,
and nine hundred and	County State of
or Indiana C	
were by me united in marriage as authorized by a marriage license issued for the County.	at mirpose by the continue
Dated this S day of June , 1981	Rev. Iom C. 1000
Filed and recorded in accordance with the laws of the State of Indiana this	
· · · · · · · · · · · · · · · · · · ·	Ene Kussell cur

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

252

Date of Application

	FEMALE
MALE Medical Examination Report Dated 5-28-81	Medical Examination Report Dated 5-38-81
Name of Physician & Thomas Christian	Name of Physician Thomas Binson
Name of Physician September 16, 21, 136 prescribed "False statement—Wh	noever procures the issuance of a license to marry by any false statement, representation or preten
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Middle Lost
Name First Middle Mc Challast	Fatricia year makingt
Date of Birth Month, Day 19 39	10 20 1941
Place of Rirth (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
3793 Creation Dr. Dudple, and.	RRA BX242, Clayton, Hendricks, Sx
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
& Other (Specify) Diners license w/Pature	A Other (Specify) Drivers liange w pietus
	Are you now or have you ever been adjudged to be of unsound mind? Notices
1. Are you now or have you ever been adjudged to be of unsound mind? No □ Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □	If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes C
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Dony allen no Clelland	Jen Dean Inabut
Chica Russell McClalland	Chief count of solviet
	Charles at any se concer
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders ssued for their support.
8. Full name of father bough Kuth McClolland	8. Full name of father Home, Dostineau
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) West Virginia	
	Birthplace of father (State or foreign country)
	9. Full maiden name of mother that the state of mother than the state o
Residence of mother (if deceased so state) Cast Back, W. Vuginia	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) West Virginia	Birthplace of mother (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.	State of Indiana,
	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Signed Lawy R, Millelland	Coticia O Smakit
New Address J. P. 2 Boy 242 Clayton July.	DD 2 P 1 2112 Cl + 1
Subscribed and an action of the subscribed and action of the subscribed an	New Address AR 2 Boll 242 Clayton, In
	Subscribed and sworn to before me this day of 19 8.
HENDRICKS Circuit Court	To land Jone Lucal Clerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	70
	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	signs, state facts which render the consent of the other parent unnecessary
	and content of the other parent uniteessaly
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
Signed	County of HENDRICKS
SignedFather	SignedFather
Signed Mother	
Subscribed and sworn to before me this day of , , 19	Signed Mother
	Subscribed and sworn to before me thisday of
COMPLETE TO A CO	Clark
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County Sup to County	
in Jake Oliver County See County Cou	T. A marriage license having been refused to the above named parties, the art by written order issued
authorizes and directs the issuance of	and filed
D. D	to the above named parties
the bi Kemembered, there was filed in my of	AND MARRIAGE CERTIFICATE
of Indiana dated the	e issued by the clerk of the HENDRICKS Circuit Court

Doorse Be it further remembered, the following marriage certificate was filed in my office, to-wit: ..., authorizing the joining together as husband and wife and Patricio one thousand nine hundred and Shereby certify that on the. State of Indiana, Groom Downeys were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of...

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

Signed.. Official Designation.

.. Circuit Court

HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 253

HENDRIC HENDRIC	KS County File County
MALE	-9-1-81
Medical Examination Report Dated S-27-8	FEMALE Date of Application
Name of Physician Muchael Media	Medical Examination Report Dated 5-27-81
AUTHORS MUST RE ANSWERED IC 21126	Name of Physician Michael No. 0
ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	pever procures the issuance of a license to marry land
MALE APPLICANT	
Name First Middle Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	Middle Office
Place of Birth (State or 1976) The Place of Birth (State or 1976)	Date of Birth Month Bay Year
Clinton Ind.	Place of Birth (State or Greign country) 1 23 1954
Residence Address Street or R. R. City County State	Residence Address Thelplo Shal.
The state of the s	Street of R. B. City County State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers Licens Specture	
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) Drivers Lecease Upicture
If answer is "yes", has the adjudication been removed? No Ves	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No Yes
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease? No Ves D
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? No Yes 4. Are you now under the influence of interior of the country o
5. Are you now under the influence of a narcotic drug? No Yes O	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Vec 0
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Resecca ann Lohrman	The state of the s
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court orders issued for their support.
8. Full name of father Robert E. Kohrmann	8. Full name of father Alfo A - Ingram
Residence of father (if deceased so state) Rockwille and.	
6:00 1-0 0	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Dana Ind
9. Full maiden name of mother 10 larg dow tustell	9. Full maiden name of mother Phylles Waddell
Residence of mother (if deceased so state) Rockville and	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Hellyslale &	D. ALC 0
State of Indiana.	Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given
County of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Lil Takens	Mana 1 O Charan
Signed man Community	Signed Signed
New Address 5/1 Kin BERLY	New Address 51/ Bethlery Size
Subscribed and sworn to before me this dar of 19.0.	Subscribed and sworn to before me this day of 19.
Circuit Court	To ory one Russian HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS State of Indiana, HENDRICKS
County of HENDRICKS ss:	
SignedFather	Signed
	Signed
Signed Mother	Subscribed and sworn to before me thisday of, 19,
Subscribed and sworn to before me this	Subscribed and sworn to before me this
Clerk	
	T A marriage license having been refused to the above named parties, the
HENDRICKS COURT ISSUED BY ORDER OF COURT HENDRICKS	T. A marriage license having been recommended and filed urt by written order issued
in County County	for marriage license to the above named parties.
authorizes and directs the issuance o	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	86 issued by the society the joining together as husband and wife
of Indiana dated the day of full	nd ance Jean Ingan
Be it further and have boliver and a	ffice, to-wit:
Be it further remembered, the following marriage certificate was filed in my o.	day of day of
one thousand Har Coleman	nereby certify that on the country of Country of
one thousand nine hundred and State of Lat.	County, State of
were by me united in marriage as authorized by a marriage license issued for to County.	hat purpose by the Clerk of the Circuit Court of
County County	11 1 - 0 - 1 - 2
Dated this day of , 19 81	Signed David Pho Der
day of	
	1 land the second of the secon
Filed and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

1 116			
1			
(/2.	- 1	5	10
- Jan	ne	0	170

.... Circuit Court

Form Prescribed By Indiana State Board of APPLICATION FOR M	MARRIAGE LICENSE File
Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977 APPLICATION FOR INDIANA APPLICATION FOR	S County Fund 5 1981 Date of Application
1 1-01	FEMALE Medical Examination Report Dated - - 8
MALE Medical Examination Report Dated	Name of Physician Janey A. Lowell
Name of Physician Larry N. Larry Whoes	over procures the issuance of a license to marry by any false statement, representation or pretens
Name of Physician Array W - Array A	FEMALE APPLICANT
MALE APPLICANT	Name A First Middle Last
Name First Middle Pubble	andra & conti
Date of Birth Month Day Rear	Date of Bitting 31 1935
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Manuagamery Caunty In
Residence Address Street or R. R. City County State State Street or R. R. Land Manual	Residence Address Street or R. R. City County State Mumsry Busp app. Light Sq.
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment O
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	
Other (Specify)	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? Nother (Specify)
1. Are you now or have you ever been adjudged to be of unsound find.	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed? No DYes No DYes	2. Are you afflicted with a transmissible disease? No ☐ Yes ☐
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Pres C
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐
5. Are you now under the influence of a narcotic drug?	Are you now under the influence of a harcotte drug. List the full names of any dependent children.
6. List the full names of any dependent children.	O. District The Control of the Contr
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No Yes C
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support. 8. Full name of father Awellah walkh Pipell	8. Full name of father launce Price
Residence of father (if deceased so state) Alcefuel	Residence of father (if deceased so state) Thornstown, In.
Birthplace of father (State or foreign country) Chauncey, Il.	Birthplace of father (State or foreign country) Indiana
Pana man Angu	Ett. 1 lash
9. Full maiden name of mother Ather May July 1880 1	9. Full maiden name of mother The State of T
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information give
County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	County of HENDRICKS State of Indiana, HENDRICKS I depose and state the information give in this application is true and correct in the application in the application is true and correct in the application in the
similar R. Lande	Signed Annala L. Cornett
New Address 29 d. Nigh Jamestown 3	New Address 29 S. Lless, James our, In.
Subscribed and sworn to before me this. 5 day of Attno. 19	+ 0 (/
Many Jan Russes - HENDRICKS	Subscribed and sworn to before me this day of HENDRICKS Circuit Court
Clerk TIETANICKO Circuit Court	My fine Sussel Clerk HENDRICKS Circuit Cou
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 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	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 ss:
Signed Father	SignedFathe
Signed Mother	SignedMoth
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19
Clerk	Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	
authorizes and directs the issuance of	f a marriage license to the above named parties
Be It Remembered there was fled in The MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE
of Indiana dated the	ise issued by the clerk of the HENDRICKS Circuit Cou
Be it further remembered, the following	and and will authorizing the joining together as husband and will and
1,	ffice, to-wit:
one thousand nine hundred and S	flice, to-wit: hereby certify that on the day of June
State of Indiana, Groom William R Pennle	at Son, County of Slay
and, Bride Handra Lee Cornett	County, State of IN
one thousand nine hundred and State of Indiana, Groom William R. Pepple and, Bride Lee Cornel of were by me united in marriage as authorized by a marriage license issued for t	County, State of 10
were by me united in marriage as authorized by a marriage license issued for to Dated this day of Jace 19.	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	
Filed and recorded in accordance with the	Signed Lonald True Official Designation Whater
Filed and recorded in accordance with the laws of the State of Indiana this	23 day of Turks

Form Prescribed By Indiana State Board of Health under Authority

APPLICATION FOR MARRIA

No	255
	THE RESIDENCE OF THE PARTY OF T

of I.C. 31-1-3-2 Effective July 1, 1977	HENDRIC	MARRIAGE LICENSE	File File
	, in about	County	
MALE Medical Examination Report Pated Medical Examination Report Pated	1981	FEMALE	Date of Application
Name of Physician Aued Haggare	1	Medical Examination Report Dated.	2 1081
Name of Trijotota			
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed shall be fined in any sum not exceeding five hundred dollars (\$500,00) MALE APPLICANT	"False statement—Wh	noever procures the issuance of a license to marrie by	t aggrand
	19 Mary		
Name Mristapher Dalyrt &	Pul Last	Name First	
Date of Birth Month 22	Year	Date of Birth Mooth	Middle Last
Place of Birth (State or foreign country)	- 60	Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. City Coun	ty State	Post head	(0)
700 X Super Visited & OB	m.	Residence Address Street or R.R.	City - County State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	TO STANDARD OF THE	Previous Marital Status: Never Married GOR	enny we fin.
Date of birth verified by: Birth Certificate Judicial Decree	Contract Contract Contract	Last Marriage Ended By: Death Divorce Ann	ulment 🗆
		Date of birth verified by: Birth Certificate U Ju	dicial Decree
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	V. 0 D	Other (Specify)	State of the latest and the latest a
If answer is "yes", has the adjudication been removed?	No Yes O	1. Are you now or have you ever been adjudged to be o	f unsound mind? No Yes
2. Are you afflicted with a transmissible disease?	No Yes D	If answer is "yes", has the adjudication been removed	d? No□ Yes□
3. Are you related to the female applicant closer than second cousin?	No Q Yes D	Are you afflicted with a transmissible disease? Are you related to the male applicant closer than see	No D Yes O
Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug?	No C Yes O	Are you now under the influence of intoxicating liqu	cond cousin? No Yes O
Are you now under the influence of a narcotic drug? List the full names of any dependent children.	No Yes D	5. Are you now under the influence of a narcotic drug?	No Ves C
		6. List the full names of any dependent children.	of the william of the sand of the said in
		The state of the s	
7. Are you required by any court order or orders to support the above			
dependent children?	No□ Yes□	7. Are you required by any court order or orders to sul dependent children?	pport the above No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfacto	ry proof that you are in	If answer is "yes", it is required that this Application	be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father August Augus August August August August August August August August August A	A THE PERSON NAMED IN COLUMN	compliance with any court order or orders issued for	
Residence of father (if deceased so state)	Talling City	8. Full name of father / Mymas	J. Smith
De de		Residence of father (if deceased so state)	anfield in.
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Ind.
9. Full maiden name of mother		9. Full maiden name of mother / /and	y J. Tents
Residence of mother (if deceased so state) # All Ngelly In	A CONTRACTOR OF THE PARTY OF TH	Residence of mother (if deceased so state)	Cainfield In.
Birthplace of mother (State or foreign country)	the second second second	Birthplace of mother (State or foreign country)	Ind.
State of Indiana. County of HENDRICKS S8: I depose and state the in this application is	e information given s true and correct.	State of Indiana, HENDRICKS	I depose and state the information given in this application is true and correct.
M. A. V		County of	Mo I'l
Signed Avalone	4	Signed	Coll My Ch
New Address A. Dort	- Home	New Address	COX 44 PGS.
Subscribed and sworp to before me this	(190/.	Subscribed and sworn to before me this	day of \$1861. 1901.
Clerk HENDRICKS	Circuit Court	1 ary me tusse	Clerk HENDRICKS Circuit Court
CONSENT OF PARRYES	A. 3-1021		
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GUARD We, the parents, of this applicant hereby give con	
We, the parents, of this applicant hereby give consent for this marriage.		We, the parents, of this applicant nereby give consigns, state facts which render the consent of the	
signs, state facts which render the consent of the other parent unnecessa	гу	signs, state facts which render the consent of the	other parent unnecessary
State of Indiana, County of HENDRICKS ss:	attached to south	State of Indiana, HENDRICKS ss:	
County of HENDRICKS		County of	Father
Signed	Father	Signed	Pather
Signed	Mother	Signed	
Subscribed and sworn to before me thisday of	19	Subscribed and sworn to before me this	
	Clerk		Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY OF	TOTAL COLUMN	T. A marriage license having been refused	to the above named parties, the
HENDRICKS	77 Co	art by written order issued	
n County X upund	ects the issuance o	f a marriage license to the above named par	lies.
00	DIAGE LICENSI	E AND MARRIAGE CERTIFICATE HEN	NDRICKS Circuit Court
Be It Remembered, there was filed in my offic	e a marriage licen	se issued by the clerk of the	
I Indiana data 1 11	(bessel)	, 19.6.1, authorized	my together as hasoana and asje
Be it further remembered, the following marriage certificate	was filed in my of	hereby certify that on the day	of Jane
The state of the s		U 1 P/2d	County of State of
tate of Indiana, Groom Christopher R. R.	27	of Hand County	state of
nd, Bride	of	of County County County Chat nurpose by the Clerk of the Circuit Courty	t of HENDRICKS
ore ou mo amit 1.	icense issued for t	that purpose by the Clerk of the Circuit Cour	THE STATE OF THE S
ounty.	91	10.0	ard Done
ated this 5 day of June	, 19.9		5 Priles
	THE REST WAR	Official Designation	, 19
liled and recorded in accordance with the laws of the State of	f Indiana this	Signed Dany Sous Rend	ODD
		Signed	HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

6-5-81
Date of Application

HENDRICKS

...Circuit Court

orm Prescribed By Indiana State Board of Indi	IARRIAGE LICENSE 6-5-81
ealth under Authority 1.C. 31-1-3-2 HENDRICKS ffective July 1, 1977	County Date of Application
	FEMALE Separt Dated 5-27-8/
MALE 5-27-8/	Medical Examination Report Dates & Dates
Medical Examination Report Dated Name of Physician Slack	Name of Physician
Name of Physician Slack ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoe and assenting five hundred dollars (\$500.00)".	ver procures the issuance of a license to marry by any false statement, representation or prete
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed Paist statement of the fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First - Ala Middle Kind Mast
Name Walk Edward Sanders	Date of Birth Month
Date of Birth Nonth Day 1953	Place of Birth (State or foreign country)
Place of Birth (State or foreign chuntry)	City County 4 See
esidence Address Street or R. R. City Chunty	56 Ridging Dr. Proundly Hond,
47 Crown Dr., Brownshing, Hend.,	Provious Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
ast Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate	Other (Specify) Drue's license W/future
Other (Specify)	1. Are you now or have you ever been adjudged to be of unsound mind?
l. Are you now or have you ever been adjudged to be of dissolated the second of the se	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed: No Yes Yes	2. Are you afflicted with a transmissible disease?
A re you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No. Ye
i. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No. You So Are you now under the influence of a narcotic drug? No. You No.
5. Are you now under the influence of a narcotic drug?	6. List the full names of any dependent children.
List the full names of any dependent children.	
The state of the s	
	7. Are you required by any court order or orders to support the above
Are you required by any court order or orders to support the above dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is requi <mark>red</mark> that this Application be accompanied by satisfactory proof that you
compliance with any court order or orders issued for their support.	compliance with any court order or order issued for their support.
Full name of father GALLE & Sandus	8. Full name of father States William Kindles
Residence of father (if deceased so state)	Residence of father (if deceased so state 56 Million 1997)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Gualine MC annuch	9. Full maiden name of mother Xully
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sas: I depose and state the information of in this application is true and cor
y Ma & S-lande-	Signed X Linda Ann Jundler
New Address 47 Cours Dr. Brownsburg &	UZ Carrier On Bruin
MOULE COME RUSALED HENDRICKS	Subscribed and swon to before me this
Clerk TIETANCKS Circuit Court	Clerk HENDRICKS Circuit
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one parents
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	signs, state facts which render the consent of the other parent diffecessary
State of Indiana, County of HENDRICKS ss:	State of Indiana,
	County of HENDRICKS ss:
Signed	Signed F
Signed Mother	Signed
subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 1
COMPLETE IF MARRIAGE LICENSE ISSUED BY CARRY	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY COU	
nauthorizes and directs the issuance	ourt by written order issuedand
and directs the issuance	of a manning li
RETURN OF MADDIAGE ASSESSED	of a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marriage line	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE DESCRIPTION OF THE PROPERTY OF
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit (
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit (
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the following statements of the following st	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit (, 19 2 , authorizing the joining together as husband and
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	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit (, 19 (1) , authorizing the joining together as husband and and office, to-wit:
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of da	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Common state of the HENDRICKS CIRCUIT STATE OF THE HENDRICK STATE OF THE HENDRICK STATE OF THE HENDRICKS CIRCUIT STATE OF THE HENDRICK STATE OF THE HE
RETURN OF MARRIAGE LICENS of Indiana dated the day of day of Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Common and and and office, to-wit: hereby certify that on the day of County of Hendricks County
RETURN OF MARRIAGE LICENS of Indiana dated the day of day of series of further remembered, the following marriage certificate was filed in my one thousand nine hundred and state of Indiana, Groom and, Bride	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Common state of the Hendricks Hendricks Circuit Common state of the Hendricks Hendricks Circuit Common state of the Hendrick Common state of the Hendrick Common state of
RETURN OF MARRIAGE LICENS of Indiana dated the day of day of series a marriage lice be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage license issued for	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit County of Herby certify that on the day of County, State of Cou
RETURN OF MARRIAGE LICENS The It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of series of Indiana dated the day of series of Indiana, Groom state of Indiana, Groom and, Bride series by me united in marriage as authorized by a marriage license issued for the series of the serie	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit County, 19 4 authorizing the joining together as husband and and office, to-wit: hereby certify that on the day of County of County, State of County, State of that purpose by the Clerk of the Circuit Court of HENDRICKS
RETURN OF MARRIAGE LICENS of Indiana dated the day of day of series and series of Indiana dated the day of series are filed in my office a marriage lice of Indiana dated the day of series are filed in my least thousand nine hundred and state of Indiana, Groom and, Bride series by me united in marriage as authorized by a marriage license issued for County. Dated this day of , 19	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit County. 19 3
RETURN OF MARRIAGE ASSESSED	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit and day of day of County of County of County, State of County, State of County, State of County, State of HENDRICKS Signed Signed Selection Signed Selection Selection Selection Selection Signed Selection Selection Signed Selection Selection Signed Se

Form Prescribed By Indiana State Board of Health under Authority of IC 311-32 Effective July 1 1977

STATE OF INDIANA

APPLICATION FOR MAR

HENDRICKS

RIAGE LICENSE	No. 25/		
	File		
County	June 5 1981		
FEMALE	Date of Application		
Medical Examination Report Da	ated May 20, 1981		
Name of Physician Kulit	Polyder 1991		

MALE Medical Examination Report Dated May 20, 1981	FEMALE Date of Application
211411	FEMALE Medical Examination Report Dated May 20, 1981
Name of Physician ANT Pallensen	Name of Physician Safet Asket
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement-Wi	Name of Physician Foliat Advisors neever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	Il straight the issuance of a license to marry by any false statement, representation or pretense
Name First Middle M A Last	FEMALE ADDITIONS
Date of Birth Month Day Year	Middle A
Place of Birth (State or foreign country)	Date of Birth Month Day Clark
met,	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Panis Comments
Previous Marital Status Never Married OR	Street or R. R. County State
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No D year	Other (Specify) / wracking T. D.
	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes" has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes No Y	If answer is "yes", has the adjudication been removed?
3 Are you related to the female applicant closer than second cousin? No D yes D	2. Are you afflicted with a transmissible disease? No Yes O
4. Are you now under the influence of intoxicating liquor? No to Yes -	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes Yes
5. Are you now under the influence of a narcotic drug? No D Yes D	5. Are you now under the influence
6. List the full names of any dependent children.	6. List the full names of any dependent children.
June 1 Claams	- Erika Clark
Jany Coldanis	Melina Comb
Jul 11/a Stamo	(Care Cury
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children' No Yes If answer is 'yes' it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their Support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Aster / la adams	compliance with any court order or orders issued for their support. 8. Full name of father Amo Lale
Residence of father (if decreased so state). Themewele . In	
Birthplace of father (State or foreign country)	A Company of the Comp
Lauria (6 h	Birthplace of father (State or foreign country)
9. Full maiden name of mother full maiden name of mother	9. Full maiden name of mother Chnelfa Chnelfa
Residence of mother is forceased so states (Messelfe) III.	Residence of mother (if deceased so state) Spllitway, In
Birthplace of mother (State or foreign country)	Birthplace of mother (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.	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
	County of Pha b
Signed James H. M. = adom	Signed Slaven L. Clark
New Address RR 1 BOX 23B Legton Lon.	New Address RRI, BOX 23B Fyton, Ond
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me this
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS Circuit Court
	OR GUADRIAN
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 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
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,	State of Indiana, HENDRICKS ss:
County of HENDRICKS **:	County of
Signed Father	SignedFather
Signed Mother	Signed
Subsective	Subscribed and sworn to before me thisday of, 19
	Clerk
Clerk	I have refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
In a linear the issuance	of a marriage license to the dest
THE PROPERTY OF LICENS	E AND MARKETTO
Re At Downstand I and Glad in my office a marriage lice	nse issued of city and wife
of Indiana dated the 10 day of Unit	SHARON LEE CLARK
D. MCADAMS	- Fee to-wit:
I,	hereby certify that on the 11 day of JUNE hereby certify that on the 11 county of MARION LAKEVIEW TEMPLE , County of INDIANA
one thousand nine hyperbolic and 81	at MARION County, State of
State of Indiana, Green JAMES H. MCADAMS	HENDRICKS County, State of MKNEREK INDIANA
and, Bride SHARON LEE CLARK of	HENDRICKS HENDRICKS
	the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for	that purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS MARTIN J. BONTRAGER
County. Dated this JUNE JUNE , 19.	SignedMINISTER
Were by me united in marriage as authorized by a marriage license issued for County. Dated this 11 day of JUNE , 19, 19	MARTIN J. BONTRAGER Signed MINISTER

Signed

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

... Circuit Court

Form Prescribed By Indiana State Board of APPI	CICATION FOR I	MARRIAGE LICENSE	File 93
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICK	County	Date of Application
		FEMALE Medical Examination Report Date	ted
MALE Medical Examination Report Dated	18-1	0	Stark
		Name of Physician	
Name of Thysician	eribed "False statement-Who	ever procures the issuance of a license to marry to	oy any talse statement, representation or preter
shall be fined in any sum not exceeding the	500,00)".	FEMALE	ALL DICHILL
MALE APPLICANT Middle	Last	Name First	Middle Last
breaks seem	Year	Date of Birth Month	Pay Year Year
ate of Birth Month	6	Place of Birth (State or foreign country)	The state of the s
Place of Birth (State or foreign country)	County State	Residence Address Street or R. R.	City County State
Residence Address Street or R. R. City	. 1304 Didples	103 Kathy Dr.	Good.
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce	Annulment 🗆
ast Marriage Ended By: Death Divorce Annulment		Date of birth verified by: Birth Certificate	Judicial Decree
Date of birth verified by: Birth Certificate Uddicial Decree			
Other(Specify)		Other (Specify) 1. Are you now or have you ever been adjudged to	be of unsound mind? No Ye
. Are you now or have you ever been adjudged to be of unsound mind?	No Yes	If answer is "yes", has the adjudication been re-	
If answer is "yes", has the adjudication been removed?	No ♥ Yes □	Are you afflicted with a transmissible disease?	No X Yes
2. Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin?	No ₹ Yes□	3. Are you related to the male applicant closer tha	
4. Are you now under the influence of intoxicating liquor?	No Yes 🗆	4. Are you now under the influence of intoxicating	
6. Are you now under the influence of a narcotic drug?	No → Yes □	 Are you now under the influence of a narcotic of List the full names of any dependent children. 	drug? No A Ye
5. List the full names of any dependent children.		6. List the full names of any dependent enforces.	
100			
		7. Are you required by any court order or orders	to support the shows
Are you required by any court order or orders to support the above dependent children?	No □ Yes □	7. Are you required by any court order or orders dependent children?	No □ Yes
If answer is "yes", it is required that this Application be accompanied by	satisfactory proof that you are in	If answer is "yes", it is required that this Applic	cation be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	- 14	compliance with any court order or orders issue	
Full name of father Manager Dear		8. Full name of father Robert	S. BIENNAN
Residence of father (if deceased so state)	, ken	Residence of father (if deceased so state)	Yes 400 16
Birthplace of father (State or foreign country)	× v	Birthplace of father (State or foreign country)	Jan. 1
9. Full maiden name of mother Sura 3. Mars	H	9. Full maiden name of mother which	Jelle
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	Truz Dada
Birthplace of mother (State or foreign country)	·	Birthplace of mother (State or foreign country)	Deg !
State of Indiana, County of HENDRICKS Sas: I depose and in this applie	state the information given cation is true and correct.	State of Indiana, County of HENDRICKS	ss: I depose and state the information gir in this application is true and corre
	L. D	County of TILINDRICKS	1
Signed & Morte I	24 Speedway	Signed \	lill & Dreynan
New Address 6417 Consulat		New Address 641	7 Consulate 4. Speldw
Subscribed and sworn to before me this		Subscribed and sworn to before me this	day of 19.
Muy published Glerk HEN	NDRICKS Circuit Court	Mary Jane Russell	Clerk HENDRICKS Circuit Co
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GU	UADDIAN
We, the parents, of this applicant hereby give consent for this m	arriage. If only one parent	We, the parents, of this applicant hereby gi	
igns, state facts which render the consent of the other parent u			
		signs, state facts which render the consent	of the other parent unnecessary

tate of Indiana,			***************************************
ounty of HENDRICKS ss:		State of Indiana, County of HENDRICKS	88:
Signed		County of HENDRICKS	
		Signed	Fath
Signed	Mother	Signed	Mot
ubscribed and sworn to before me thisday of	, 19	Subscribed and sworn to before me this	day of, 19
			Ch
COMPLETE IF MARRIAGE LICENSE ISSUED HENDRICKS County	BY ORDER OF COUR	RT A mania I)tion t
HENDRICKS County authorizes		ourt by written order in	fused to the above named parties,
n authorizes	and directs the issuance	of a marriage license to the shows	J
RETURN O	F MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE	d parties.
of Indiana dated the	ny office a marriage licer	SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the	HENDRICKS Circuit Con
11/0-13 6	fleal	, 19 guthorizing the	e joining together as husband and wi
Be it further remembered, the following marriage cer	tificate was filed in me	and alexes & Bren	Max Control of the Control
tate of Indiana, Groom		at Promise at the	day of June
a little		The state of the s	a in the table to the harding
ere by me united in marriage as authorized by a ma	nay of	Hendrich	County, State of
marriage as authorized by a ma			County, State of HENDRICKS
ated this 3 day of	٧, ٩	\	Court of
			B Oak
iled and recorded in accordance with the laws of the			· · · · · · · · · · · · · · · · · · ·
with the laws of the	State of Indiana this	day of	1891

Form Prescribed By Indiana State Board of

STATE OF INDIANA

Health under Authority of LC 31-1-3-2 Effective July 1 1977 HENDRIC	MARRIAGE LICENSE No. 259 File
	County /2- 8 91
MALE Medical Examination Report Dated 6.2.8	FEMALE Date of Application
Name of Physician Thomas Walker	Medical Examination Report Dated 6.2-8/
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,000)". MALE APPLICANT	Name of Physician homes Walker
MALE APPLICANT	oever procures the issuance of a license to marry by any false statement, representation or pretense
Name Charles Rimiddle R. Last	FEMALE APPLICATE
Date of Birth Month Day Year Year	Potrinia Middle /
Place of Birth (State or foreign country)	Date of Birth Month Curlis Day Year
Residence Address Street or R. R. City County State	Place of Birth (State or forgen country)
Previous Marital Status Never Married OR	Residence Address Street or R. R. City County State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Marriage
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? NoX Yes U	Other(Specify)
If answer is "yes" has the adjudication been removed? No Ves C	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Ves
NY4 1es U	2. Are you afflicted with a transmissible disease? No Yes
Are you now under the influence of intoxicating liquor? No Yes No Y	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes D	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	Tracie ann Centio
7. Are you required by any court order or orders to support the above	The second secon
dependent children' No Ves V	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Charles W. Birkemeier	compliance with any court order or orders issued for their support. 8. Full name of father.
Residence of father (if deceased so state)	Residence of father (if deceased so state) Magnes will. Sad.
Birthplace of father (State or foreign country Indiana	Birthplace of father (State or foreign country Sulion or
9. Full maiden name of mother granette Monroe	9. Full maiden name of mother salle Devotin
Residence of mother (if decreased so state) Science of the Solonia State)	Residence of mother (if deceased so state) Mosa equille Ind.
Birthplace of mother (State or foreign country adiana	Birthplace of mother (State or foreign country)
State of Indiana. County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
Signed Charles R. Birhemier	County of Patricia and Curtin
New Address 4/2 S Grant Brownshing IN.	Signed
Subscribed and yourn to before me this Subscribed and yourn to be some things and yourn to be some	New Address
May are Russell Gerk HENDRICKS Circuit Court	Mary and Pussell Clerk HENDRICKS Circuit Court
- 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	Court of Indiana
County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
Signed Father	Signed Father
Signed Mother	Signed
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the
TENDRICKS	ert hy written order issued
authorizes and directs the issuance of	a marriage license to the dist
TO THE PROPERTY OF LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of an Be it further remembered, the following marriage certificate was filed in my off the latest the following marriage certificate was filed in my off the latest the following marriage certificate was filed in my off the latest the following marriage certificate was filed in my off the latest	, 19
and dated the day of	a Patricia A Curtis
Be it further remembered, the following marriage certificate was filed in my of	ereby certify that on the day of June, County of Hend,
one thousand	10
of Indiana C	Country State of
and, Bride Potricia A. Cutis of	County, State of County, State of HENDRICKS
were by me united in marriage as authorized by a marriage license issued for the	hat nurpose by the Clerk of
Dated this 12 day of June , 1981	Signed Robert Warlett Michigan Designation 1981
day of	ficial Designation MINISTER , 1981
Filed and records !	an of Tune

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

day of Ture
HENDRICKS

...Clerk Circuit Court

APPLICATION FOR MARRIAGE LICENSE

Date of Application

... Circuit Court

Health under Authority	CATION FOR M	SCounty	Date of Application
Effective July 1, 1977		FEMALE Medical Examination Report Dated	6-2-81
MALE Medical Examination Report Dated	· box	Name of Physician	all feeling
Name of Physician ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribe and part exceeding five hundred dollars (8500).	Whoe statement - Whoe	ver procures the issuance of a license to marry by a	ny false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribe shall be fined in any sum not exceeding five hundred dollars (\$500).	00)".	FEMALE AF	PLICANT
MALE APPLICANT	Last	Name First	Middle Last
Name First Middle	Year	Date of Birth Month	Day Year
Date of Birth Month, Day	1959	Place of Birth (State or foreign country)	had.
Place of Birth (State or foreign country)	ounty /State	Residence Address Street or R. R.	City County State
Residence Address Street or R. R. Street or R. Street o	fu.	Previous Marital Status: Never Married OR	menuell fr
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce An	nulment Degree
Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate J	dicial betree
1 Di Zini I		Other (Specify)	
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	No D Yes D	 Are you now or have you ever been adjudged to be If answer is "yes", has the adjudication been removed. 	
If answer is "yes", has the adjudication been removed?	No ☐ Yes ☐	Are you afflicted with a transmissible disease?	No Yes D
2. Are you afflicted with a transmissible disease?	No Wyes	3. Are you related to the male applicant closer than se	
Are you related to the female applicant closer than second cousin? Are you now under the influence of intoxicating liquor?	No Wes	4. Are you now under the influence of intoxicating liq	
5. Are you now under the influence of a narcotic drug?	No □ Yes □	 Are you now under the influence of a narcotic drug List the full names of any dependent children. 	No ✓ Yes □
6. List the full names of any dependent children.		6. List the full names of any dependent street	
			unnort the share
7. Are you required by any court order or orders to support the above dependent children?	No□ Yes□	Are you required by any court order or orders to so dependent children?	No U Yes U
If answer is "yes", it is required that this Application be accompanied by satis	factory proof that you are in	If answer is "yes", it is required that this Application	
compliance with any court order or orders issued for their support.	2.	compliance with any court order or orders issued for	or their support.
8. Full name of father TM Tomb	0	8. Full name of facilie	Damille la
Residence of father (if deceased so state)	The .	Residence of father (if deceased so state)	Sul the
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Dilland
9. Full maiden name of mother All Maiden name of mother	. 1	9. Full maiden name of mother	Danillo I
Residence of mother (if deceased so state)	· fr.	Residence of mother (if deceased so state)	anyell, yn.
Birthplace of mother (State or foreign country) State of Indiana. I denose and state		Birthplace of mother (State or foreign country) State of Indiana,	I depose and state the information given
time to be a second of the sec	te the information given on is true and correct.	County of HENDRICKS	in this application is true and correct.
Signed Rishard allen Sone	u)	Signed Larraha	Sue Deckard
New Address 191 N Cross	<i></i>	New Address 1917	ross Street
Subscribed and sworm to before me this 5 and day of	Muc , 1981.	Subscribed and sworn to before me this	day of fine 190/
Thus gene Hasself Clerk HEND	RICKS Circuit Court	Mary fine Jusself	Clerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GUA	RDIAN
We, the parents, of this applicant hereby give consent for this marr	riage. 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 unner	ecessary	signs, state facts which render the consent of	the other parent unnecessary
State of Indiana, County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	s:
Signed	Father	Signed	Father
Signed		Signed	Mother
	, 19	Subscribed and sworn to before me this	10
	Clerk		Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY	Y ORDER OF COLU	275 A	narties, the
County			and filed
in authorizes an	nd directs the issuance	of a marriage license to the above named	narties
RETURN OF	MADDIAGE		
			HENDRICKS Circuit Court
of Indiana dated the day of day of the states	yu.	, 198, authorizing the	joining together as husband and wife
be it further remembered, the following marriage certi	faata	and lamela) 1)ec	Rand
one thousand nine hundred and 8		hereby certify that on the	day of June
one thousand nine hundred and State of Indiana, Groom Richard A. and, Bride Speckard	Janes	at benuille	County of Herd
and, Bride Jamela J Der Karr	<u> </u>		ounty, State of
County me united in marriage as authorized by a marr	riago liconos i	Co	ounty, State of LENDRICKS
Dated this day of June	200000 107	the Clerk of the Circuit (Jourt of HENDINGS
	, 19	Signed Ronald	E McDuale
Filed and recorded in accordance with the		Official Designation Minist	X
Filed and recorded in accordance with the laws of the S	State of Indiana this	day of Jun	0 19 %

APPLICATION FOR MARRIAGI

	0/1
No	261
	TO THE RESERVE THE PARTY OF THE

	2/1
0	001

Effective July 1, 1977 HENDRIC	KS File_
	County Lune 8, 1981
MALE Medical Examination Report Dated 6-5-81	FEMALE Date of Application
Name of Physician U. Oleck	Medical Examination Report Dated 6-5-81
ALL OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed apart.	Name of Physician Q. Oleck
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (8500,000". MALE APPLICANT	ever procures the issuance of a license to marry by any followers
First 1	
Mark Ellis Taylast	Name A First /
Date of Birth Out 12 1954	Date of Birth Month Lee Harben
Place of Birth (State or foreign country) Andlance	Place of Birth (State or foreign country)
Residence Address Street or R. R. Paril: agounty State	Residence Address Surjection Androw,
Previous Marital Status Never Married OR	86/6 Wavely Rol. Ma Fixed McCounty State g-
Previous Marian Status. Sever Statement Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate U Judicial Decree	Last Marriage Ended By: Death Divorce Appulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Tyes If answer is "yes" has the adjudication been removed?	1. Are you now or have you ever been adjuded at 1.
2. Are you afflicted with a transmissible disease? No Year	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Ves C	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No 2 yes 0	3. Are you related to the male applicant closer than second cousin? No Yes 4. Are you now under the influence of interior to the second cousin?
5. Are you now under the influence of a narcotic drug? No W Yes D	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No D Yes D
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court opper or orders haved for their support	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father lifted Joseph Coulde	8. Full name of father Robert Benkom Harbin
Residence of father (if deceased so state) Planfield, Indiana	Residence of father (if deceased so state) Plainfield, Ind
Birthplace of father (State or foreign country). Andrewa	Birthplace of father (State or foreign country) Angliona
9. Full maiden name of mother Noonea Jean Lee	9. Full maiden name of mother Crelin Lenova Limmermon
Residence of mother (if deceased so states Plainfield In	Residence of mother (if deceased so state) Planfield Ind.
Birthplace of mother (State or foreign country) Androxa	111:1
State of Indiana.	Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given
County of HENDRICKS and in this application is true and correct.	County of
Signed Mark Ellis Laylor	Signed Clarky Lee Harbise
New Address 8610 WAvelly Kol.	New Address 86010 Chaverly Rof.
Subscribed and aways to before me this & day of June 1981.	Subscribed and sworn to before me this
Mary Jone Russell Gerk HENDRICKS Circuit Court	Man Mone Russell Glerk HENDRICKS Circuit Court
	70
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 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	signs, state facts which render the consent of the other parent unnecessary
The second secon	
State of Indiana.	State of Indiana, HENDRICKS } ss:
County of HENDRICKS \$885	County of
Signed	Signed
Signed Mother	Signed Mother
Subsective	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
The state of the s	having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license naving been retuded and filed and filed
authorizes and directs the issuance of	a marriage
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court the issued by the clerk of the
Be At Domanhand Alana and Glad in my office a marriage weeks	touthou as husband and wife
Be it further remembered, the following marriage certificate was filed in my of	d Chartoy L. Harpin
Be it further remembered, the following marriage certificate was filed in my of	ereby certify that on the day of June, County of Hend
Daniel E Greek	ereby certify that on the
me thousand nine hundred and the thousand nine hundred and	County, State of
the thousand nine hundred and State of Indiana, Groom South of State of Indiana, Groom South of State of South of South of South of State of South	Hend County, State of HENDRICKS
ore by me united in marriage as authorized by a marriage license issued for the county.	hat purpose by the Clerk of the Circuit Court of
County,	Coriel E. Finel

Official Designation.

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

.Clerk

Circuit Court

APPLICATION FOR MARRIAGE LICENSE

File			
		-	-
h	IM	5,	1981

HENDRICKS

... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977 FOR INDICATION FOR I	MARRIAGE LICENSE (S County Date of Application
Effective July 1. 1711	FEMALE (2-1-81
MALE 6-1-8/	Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician Anna Clack
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whomas and exceeding five hundred dollars (8500,00)".	over procures the issuance of a license to marry by any false statement, representation or presentation or pre
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who	ever productive and a p
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Middle
Middle Last	Name Parkera G. Wooden
Day Year	Date of Birth Month Day Year
Date of Birth	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.	55 Juncala Dlaumshurg An.
HT2 Dex 122 Dimensioning	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth vernied by.	Other (Specify) A. Oscense
Other (Specify) W. A. Alles	1. Are you now or have you ever been adjudged to be of unsound mind?
1. Are you now or have you ever been adjudged to be of unsound find.	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease? No Vyes
2. Are you afflicted with a transmissible disease? No	3. Are you related to the male applicant closer than second cousin? No Type!
4 Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Vest
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	Stephanie Wooden
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are compliance with any court order or orders issued for their support.
compliance with any court order or/orders issued for their support. 8. Full name of father AMM AMM	8. Full name of father Adurt Dramble
P a head of	Burn In A
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother deally dark	9. Full maiden name of mother Ansy Super
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana,
County of n this application is true and correct.	County of HENDRICKS \$88: in this application is true and correct
Signed Harried & Thazel	Signed Bar Lara a Claroller
New Address 55 Tincohn are Biles	New Address 55 Lex color Brownshing &
Subscribed and sworn to before me this day of day of	Subscribed and sworn to before me this day of Ayes, 1924
) and fire trouble Clerk HENDRICKS Circuit Court	Mary Jase Xussell Glock HENDRICKS Circuit Cou
Clerk Circuit Court	A Clerk 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 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	
	signs, state facts which render the consent of the other parent unnecessary.
State of Indiana, County of HENDRICKS }ss:	State of Indiana,
	County of HENDRICKS ss:
SignedFather	SignedFathe
Signed Mother	Signed Moth
Subscribed and sworn to before me thisday of, 19	
	Subscribed and sworn to before me this day of 19
COMPLETE III MADDAGE	UE
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	RT. 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 LICENS	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of	nse issued by the clerk of the HENDRICKS Circuit Cour
of Indiana dated the day of Be it further remembered the falls	19 8 authorizing the joining teacther as husband and wil
Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and	office, to-wit:
one thousand nine hundred and	hereby certify that on the
State of Indiana, Groom. Dovid	County of
and, Bride Darbara A. Words	County State of
County.	County, State of
Dated this day of June, 196	purpose by the Clerk of the Circuit Court of HENDRICKS
, 196	
Filed and recorded	Signed for John Hall Official Designation Sathalia Freet
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Catholic Priest

APPLICATION FOR MARR

No. 2	63	
		-

of LC. 31 1-3-2 Effective July 1 1977 HENDRICK	S County File
MALE (5.91	0.4.01
Medical Examination Report Dated 0 3-8	FEMALE Date of Application
Name of Physician Thomas Walkly	Medical Examination Report Dated 6-5-8/
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whoshall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	Name of Physician Thomas Walker
shall be fined in any sum not exceeding tive hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation or protocols
First Middle	
e on D. Illa ata a -	Name First Middle
Date of Birth	Date of Birth Month Day
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Year 1957
Residence Address Street or R. R. City County States	Regide
Previous Marital Status: Never Married OR	320 7 County State
Last Marriage Ended By Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Driveles accorde a prature	& Other (Specify) Drivers livens a w Richard
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? Note Yes	2. Are you afflicted with a transmissible disease? No ▼ Yes □
4. Are you now under the influence of intoxicating liquor? No Yes -	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes No Ye
5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	· · · · · · · · · · · · · · · · · · ·
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Dermoy Masters	8. Full name of father west Smith
Residence of father (If deceased so state) Brown burg, and.	Residence of father (if deceased so state) Russiaville Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign gountry Lenno soll.
9. Full maiden name of mother Betty Dewnem	9. Full maiden name of mother Gracia Norton
Residence of mother (if deceased so state) Externo burg. and.	Residence of mother (if deceased so state) Recosianelle Ind.
State of Indiana. I depose and state the information given	Birthplace of mother (State or foreign country
County of HENDRICKS sa: in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
Signed Son Dhalo	Signed Rebecca S. Smith
New Address 3885 N 950E Brownsborg In	New Address 3885 N. 950 E Brownsburg In
Subscribed and sworp to before me this 9 day of June 1981	Subscribed and sworn to before me this quay of June 1981.
Maria D. and A HENTOPICKS	Mary and Ressellark HENDRICKS Circuit Court
Trutte Court Court 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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, USA INDICKS ss:
County of HENDRICKS ss:	County of State of Humans, HENDRICKS
Father	Signed
SI S	Signed
Signed Mother	Subscribed and sworn to before me thisday of, 19,
Subscribed and sworn to before me this	Subscribed and short Clerk
Clerk	fined to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above hamed parties, and filed urt by written order issued
HENDRICKS County Superior # 2 Con	urt by written order issued
	AND MARKIAGE CERTIFICATION Circuit Court
Indiana dated the day of	Debecce S. Sulling
D. lon III asters	Fire to-wit:
1, Per Donald Tyles	day of day of dendricks, country of Hendricks, the Hendricks Country, State of Johnstone
and, Bride Robecca S Smith of	MENDRICKS MENDRICKS
	Lat murnose by the Clerk of the Circuit Court
were by me united in marriage as authorized by a marriage license issued for t	hat purpose by the Clerk of the Circuit Court of Signed Signed

Official Designation.....

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

HENDRICKS

Clerk

... Circuit Court

APPLICATION FOR MARRIAGE LICENSE

.... Circuit Court

Form Prescribed By Indiana State Board of APPLICAT	ION FOR MA	ARRIAGE LICENSE	File
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of Application
		FEMALE Medical Examination Report Date	ted 6-2-81
MALE Medical Examination Report Dated (1)		Name of Physician	Clark
Name of Physician Orle Clarke	Nil week	procures the issuance of a license to marry i	by any false statement, representation or pro-
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "Fa shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	lse statement - w noever	FEMALE	APPLICANT
shall be fined in any sum not exceeding the hundred. MALE APPLICANT		Name / First	Middle
Name First , Middle .	Last	Date of Birth Month	Day Year
Date of Birth Month Day 92	ar	Place of Birth (State or foreign country)	19 19354
Place of Birth (State or foreign country)			the City County State
Residence Address Street or R. R. City County	State	Residence Address Street or R. R.	sca City County State
118 Thun St Thungula	- The second	Previous Marital Status: Never Married OR	
Previous Marital Status: Never Married OR		Last Marriage Ended By: Death Divorce	Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	J Judicial Decree
		Other(Specify)	
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes 🗆	1. Are you now or have you ever been adjudged to	
If answer is "yes", has the adjudication been removed?	No TYes T	If answer is "yes", has the adjudication been re-	
2. Are you afflicted with a transmissible disease?		 Are you afflicted with a transmissible disease" Are you related to the male applicant closer that 	an second cousin? No V
3. Are you related to the female applicant closer than second cousin?	No Wes O	Are you now under the influence of intoxicating	
4. Are you now under the influence of intoxicating liquor?5. Are you now under the influence of a narcotic drug?		5. Are you now under the influence of a narcotic of	
6. List the full name's of any dependent children.		6. List the full names of any dependent children.	
Kathy King		Sue - Isam	
Shirtey Sing			
7. Are you required by any court order or orders to support the above		7. Are you required by any court order or orders	to support the above
dependent children?	No □ Yes □	dependent children?	No U
If answer is "yes", it is required that this Application be accompanied by satisfactory	proof that you are in	If answer is "yes", it is required that this Applic compliance with any court order or orders issue	
compliance with any court order or orders issued for their support.		8. Full name of father	W// 1
Residence of father (if deceased so state)	Lu	Residence of father (if deceased so state)	deciment
Birthplace of father (State or foreign country)	9	Birthplace of father (State or foreign country)	Shot i
Wandi Ablanta		Ma	My Sunel
9. Full maiden name of mother	A.	9. Full maiden name of mother	1 1/200 12
Residence of mother (if deceased so state)	a g	Residence of mother (if deceased so state)	The terms of the second
Birthplace of mother (State or foreign country) State of Indiana, I depress and state the in-	formation dive	Birthplace of mother (State or foreign country) State of Indiana,	I depose and state the information
County of HENDRICKS ss: I depose and state the in this application is t	rue and correct	County of HENDRICKS	ss: I depose and state the information in this application is true and co
Signed en Cuntis	Kuis	Signed Will	ma Katherine
New Address & 1 Box 341 Monrou	ia Ind	New Address Rd /	Box 341 Monrou
Subscribed and sworn to before me this	198/	Subscribed and sworn to before me this	day of May 1
I am Auston HENDRICKS	Circuit Court	Man has	ALENIDDICKS
	——————————————————————————————————————	I way gene fuse	W. Glerk
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GU	UARDIAN
We, the parents, of this applicant hereby give consent for this marriage. If	only one parent	We, the parents, of this applicant hereby gir	ve consent for this marriage. If only one
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, County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	- 58:
Signed		County of HENDRICKS	
Signed	III	Signed	F
Subscribed and sworn to before me this	Mother	Signed	
uay oi		Subscribed and sworn to before me this	day of
	Clerk	<u></u>	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORI HENDRICKS County	ER OF COURT.	A marriage license having been re-	fund to the shows named parties
and difec	its the issuance of a	a marriage license to the above named	d parties.
of Indiana dated the	a marrage ticense	issued by the clerk of the	HENDRICKS Circuit C
of Indiana dated the Ath day of Be it further remembered the full	June	, 19, authorizing the	joining together as husband and
1 a Color of the following marriage certificate u	vas filed in my offic	e, to-wit:	ine lind
one thousand nine hundred and. 81 State of Indiana, Groom. Dennie C. King and, Bride. Who K. King were by me united in marriage as authorized by a marriage lie County.	at	Danville	County of Hend
and, Bride VIIII	\	C	County, State of
were by me united in marriage as authorized by a marriage !!	ofV	lorgan	County, State of Ind
were by me united in marriage as authorized by a marriage lied. Dated this day of Dune	ense issued for tha	it purpose by the Clerk of the Circuit	Court of HENDRICKS
aay of Ung	, 198\		
Filed and many !	0.0	Signed Wary	
Filed and recorded in accordance with the laws of the State of	Indiana this	Guardian Designation Clerk	81
	0.000	day of clinic	100

..Clerk

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

Dated this....

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

STATE OF INDIANA

APPLICATION FO

OR MARRIAGE LICENSE	No. 265
IDRICKS	File

Effective July 1. 1977 HENDRICK	S File
MALE	County 6-9-8/ Date of Application
Medical Examination Report Dated 6-3-8/	FEMALE
Name of Physician Gric Clork	Medical Examination Report Dated 6-5-81 Name of Physician 6 110 Clark
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT	ever procures the issuance of the
MALE APPLICANT	the issuance of a license to marry by any false statement, representation or pretense
Name First Middle Williast	Name Frank
Date of Birth Month Day	Date of Birth White Sul Last
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. City County State	Parido Inacanopolis In.
Previous Marital Status: Never Married OR	PR + 2 Bot 376 Clayton Am
Previous Marital Status. Never Married — OR Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Other (Specify) Davers Licenses State of Hours	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	Other (Specify) armed Jorces Incard
If answer is "yes", has the adjudication been removed? No Ves Ves	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No□ Yes□ 2. Are you afflicted with a transmissible disease? No□ Yes□
3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Ves	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	 5. Are you now under the influence of a narcotic drug? No ☐ Yes ☐ 6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any cours order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Mussell Tringkt	8. Full name of father Glouge Long
Residence of father (if deceased so state)	Residence of father (if deceased so state) Martins velle Sw.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Inagle. Ind.
9. Full maiden name of mother Thus Mueller	9. Full maiden name of mother Sandra Folick
Residence of mother (if deceased so state) Hawahi Walanay	Residence of mother (if deceased so state) Clayton,
Birthplace of mother (State or foreign country) Mawaii State of Indiana.	Birthplace of mother (State or foreign country) Indianaphles State of Indiana
County of HENDRICKS 88: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.
Signed of the L kinglet	Signed Copilling 5 Long
New Address 89-345 Kawavahi Ave	New Address 89-345 Kauwahi, Hi
Subscribed and sween to before me this Ith day of June 19.8	Subscribed and sworn to before me this 9th day of June 1981.
Mary an Russell Clerk HENDRICKS Circuit Court	Mary Jane Russell Glerk HENDRICKS Circuit Court
	THE PARKET OF CHAPPIAN
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 parent
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	we, the parents, of this applicant hereby sive content of the other parent unnecessary
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which the
	State of Indiana, USA INDICKS \$88:
State of Indiana, County of HENDRICKS ss:	County of
Father	Signed
Mother	SignedMother
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of19
Clerk	Clerk
	T A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS	ourt by written order issued. Say wasser and filed
in (1) P H 1 1 1 1 1 1 1 1 1	f a marriage license to the above names p
MAPRIAGE LICENS	E AND MARKIAGE Circuit Court
The It Remembered, there was filed in my office a marriage licent of Indiana dated the day of a	and ffice, to-wit:
Be it further remembered, the following marriage certificate was filed in my o	fice, to-wit:
one thousand the same of the s	County, State of
one thousand nine hundred and State of Indiana, Groom and, Bride were hundred is suited by the state of indiana, of the s	County, State of HENDRICKS
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
County.	Non woll

Official Designation.

the f

rriage

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

402 Date of Application

... Circuit Court

HENDRICKS

266

Form Prescribed By	TON FOR M	MARRIAGE LICENSE	File 42
Health under Authority	HENDRICK	S County	Date of Application
ffective July 1, 1977		FEMALE	
MALE Section Report Dated 6-8-81		Medical Examination Report Date	ed G-8-8
Medical Examination Report Edited	1	Name of Physician	Jack
Name of Physician Slack		our procures the issuance of a license to marry by	any false statement, representation or preten-
Te 21.1.3.6 prescribed 13	alse statement - w not	FEMALE	APPLICANT
ALL QUESTIONS MUST BE ANSWERED. IC. 3 Polyage Mall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT		First	Middle Last
Millio	ast	Name Month	Day Year
Day Y	ear	Date of Birth	14 64
\$ 12 G	13	Place of Birth (State or foreign country)	0
Place of Birth (State or foreign country)	State	Residence Address Street or R. R.	City County State
Residence Address Street or R. R. City H. R. R. P. L. Die	2	Married & OR	
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OR Last Marriage Ended By Death Divorce	Annulment 🗆
ast Marriage Ended By: Death Divorce Annulment		Date of birth verified by Birth Certificate	Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree			
Other (Specify)		Other (Specify) The you now or have you ever been adjudged to the second seco	be of unsound mind? No Yes
1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes	Are you now or have you ever deen adjudged a If answer is "yes", has the adjudication been ren	
If answer is "yes", has the adjudication been removed?	No Yes	2 Are you afflicted with a transmissible disease*	No X Yes
2. Are you afflicted with a transmissible disease?	No ♥ Yes □	3. Are you related to the male applicant closer tha	
 Are you related to the female applicant closer than second cousin? Are you now under the influence of intoxicating liquor? 	No Yes 🗆	4. Are you now under the influence of intoxicating	
 Are you now under the influence of influence of influence. Are you now under the influence of a narcotic drug? 	No Yes 🗆	5. Are you now under the influence of a narcotic d	irug [®] No ✓ Yes
6. List the full names of any dependent children.		6. List the full names of any dependent children.	
7. Are you required by any court order or orders to support the above	No□ Yes□	7 Are you required by any court order or orders to dependent children"	to support the above No No Yes
dependent children?			ation be accompanied by satisfactory proof that you are
If answer is "yes", it is required that this Application be accompanied by satisfactory compliance with any court order or orders issued for their support.	y proof that you are in	compliance with any court order or orders issue	ed for their support.
8. Full name of father Lange M. Ralph		8. Full name of father Chiphes W	o Costa
Residence of father (if deceased so state)		Residence of father (if deceased so state)	and gulian
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Carachel
9. Full maiden name of mother Costons 5. Res	22022	9 Full maiden name of mother Ass	
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	
			Cut.
State of Indiana	information along	Birthplace of mother (State or foreign country). State of Indiana,	
State of Indiana, County of HENDRICKS Sas: I depose and state the in this application is	true and correct.	County of HENDRICKS	I depose and state the information gives in this application is true and corre
Signed & Lonnie Ralph		Signed X MO	ercia E. Carter
New Address 45 Rachel Di			Rochel Wr.
Subscribed and sworn to before me this	1301	Subscribed and sworn to before me this	0
Mary Que Russel Clerk HENDRICK		Mary Jose Resse	
) () () () () ()	Circuit Court	in and have some	A. A. Gerk
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR G	UARDIAN
Ve, the parents, of this applicant hereby give consent for this marriage.	If only one parent	We, the parents, of this applicant hereby gi	ive consent for this marriage. If only one par
gns, state facts which render the consent of the other parent unnecessa	ry	signs, state facts which render the consent	

			PART (SEE SOURCE LEVEL SOURCE CONTRACTOR CON
ate of Indiana.			***************************************
ate of Indiana, unty of HENDRICKS ss:		State of Indiana, HENDRICKS	88:
		County of PICINDRICKS	
Signed		Signed	Fat
Signed		Signed	Mo
bscribed and sworn to before me thisday of	, 19	Subscribed and sworn to before me this	day of 19.
	Clerk		C
COMPLETE IF MARRIAGE LICENSE ISSUED BY OF	RDER OF CON	DT 4	A model
County County			01
in South Office and dir	rects the issuance	of a marriage license to the	Jan Lace
RETURN OF MAI	DDIACE TYONA		ed parties.
		SE AND MARRIAGE CERTIFICATE	HENDRICKS Circuit Co

De it further remembered the following.		and I craise	The transfer of the same
one thousand nine hundred and	was filed in my	office, to-wit:	C. C
one thousand nine hundred and	***************************************	hereby certify that on the	day of
State of Indiana, Groom Son W. C. J.	Part -	at been replayed in	County of
and, Bride Marrie & Econo Car	700	ON STANDARD	County, State of Share
vere by me united in marriage as authorized by a marriage	license issued for	that the things were	County, State of WENDPICKS
Dated thisday of	0	the Clerk of the Circuit	t Court of HENDRICKS
William Committee of the Committee of th		G:	Q
filed and recorded in		Official Designation	June
Filed and recorded in accordance with the laws of the State	of Indiana this	Official Designation To at a	
		day of	19.3.2.

APPLICATION FOR MARRIAGE LICENSE

Date of Applicat

MALE Medical Examination Report Dated Name of Physician LL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—W	FEMALE Medical Examination Report Dated	
MALE Medical Examination Report Dated Name of Physician Name of Physician	Medical Danis	18-3
Name of Physician Black	Name of Physician	
Name of Tripleton	Name of Physician	at, representation or protect
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed 1 and (\$5.00.00)"	hoever procures the issuance of a second procure the issuance of a second procure of the issuance of a second procure of the issuance of the i	to Cuen
hall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	First Middle	Last
MADE AT DOOR	Marris Ellen	Year
ate of Birth Month Day Year	Date of Birth Month Place of Birth (State or foreign country)	401
lace of Birth (State or foreign country)	Indiana	County State
esidence Address Street or R. R. City County State	Residence Address Street or R. R. City	C crute
45 Rarkel Dr. Pell. Ind.	Previous Marital Status: Never Married OR	<u></u>
revious Marital Status: Never Married OR ast Marriage Ended By: Death Divorce Annulment	Marriage Ended By Death Divorce Annulment	
ate of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree	
Other (Specify)	 Are you now or have you ever been adjudged to be of unsound mind? 	No ₩ Yes
Are you now or have you ever been adjudged to be of unsound mind: No Yes If answer is "yes" has the adjudged to been removed?	If answer is "yes", has the adjudication been removed?	No□ Ye
Are you afflicted with a transmissible disease?	The state of the s	No ⋈ Ye
Are you related to the female applicant closer than second cousin? No Yes No		No 9 Ye
Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug? No Ves	5. Are you now under the influence of a narcotic drug?	No X Ye
List the full names of any dependent children.	6. List the full names of any dependent children.	
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above	No□ Ye
dependent children? $\frac{1}{1}$ Yes $\frac{1}{1}$ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in		
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.	
Full name of father garyon. Ralph	8. Full name of father Chipdes W. Costes	
Residence of father (if deceased so state)	Residence of for home of	
the mother of Lonnie Wayne Ralph give my	ingion for the	
narriage of my son to Marcia Ellen Carter.	Carly Michigan	d state the information g
A STATE OF THE STA	my enus Esperies 3-7-84 my enus Esperies 3-7-84	ENDRICKS Circuit Co
ONSENT OF PARENTS, PARENT OR GUARDIAN		
I, the father of Lonnie Wayne Ralph give m	y permission for the	arriage. If only one pa
		nnecessary
marriage of my son to Marcia Ellen Carter.	000	
	parent oragah	
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7.	ny Commune & years 3-7-84	Me
Doc. , 19	II Salvania	MC
Clerk	day ofday of	
	40-7	***************************************
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO HENDRICKS County Dug T	Count has available	pove named parties,
authorizes and directs the		A 164-11-11
RETURN OF MARRY OF THE	NSE AND MARRIAGE CERTIFICATE	- 4.0
RETURN OF MARRIAGE LICENTE State of the issuance of the second of the se	icense issued by the clork of the	Campaigt (
RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage lift in a day of the following of the fol	and, 19, authorizing the joining togeth	er as husband and
RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage life in further remembered, the following marriage certificate was filed in m	and and a construction of the authorizing the joining together of the and are office, to-wit:	er as husband and
RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage lift of Indiana dated the day of day	and and a series and a series of the series and a series of the series o	er as husband and i
RETURN OF MARRIAGE LICES f Indiana dated the day of day o	and and a phase to the day of the at t	Magan

Signed ...

.. Circuit Court

HENDRICKS

Official Designation.

Signed Signed

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

Form Prescribed By Form Prescribed by Indiana State Board of Health under Authority of LC 31 1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

No	267	
File_	10 300	March angles School of Sect
9	une 10,	198
	Date of Applica	tion

HENDRICKS

Circuit Court

MALE Medical Examination Report Dated FEMALE Medical Examination Report Dated Name of Physician ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT Previous Marital Status Never Married A OR Last Marriage Ended By Death Divorce Annulment D Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify)_ Are you now or have you ever been adjudged to be of unso 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes" has the adjudication been reme No D Yes D No Yes If answer is "yes", has the adjudication been removed? you afflicted with a transmissible disease No D Yes D No Yes D 2. Are you afflicted with a transmissible disease? Are you related to the female applicant closer than second cousin? No Yes No Yes D 3. Are you related to the male applicant closer than second cousin? you now under the influence of intoxicating liquor No Yes O No Yes D 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug! No P Yes D No Tyes D 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children No Yes 6. List the full names of any dependent children. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No Tes D dependent children? If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in No O Yes O If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Residence of father (if deceased so state) Birthplace of mother | State or foreign country L Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana. HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary State of Indiana. State of Indiana, HENDRICKS County of Signed. Father Mother 19...... day 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. 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. 4...., authorizing the joining together as husband and wife of Indiana dated the Heren 3 contend comed 168 Commas Sammas Leaser! Be it further remembered, the following marriage certificate was filed in my office, to-wit: ... hereby certify that on the Donald one thousand nine hundred and State of Indiana, Groom MichaelCounty, State of ... of Hand and, Bride Lawa C. Everett were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County. County. Dated this ... Official Designation .. Filed and recorded in accordance with the laws of the State of Indiana this... .Clerk

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APPLICATION FOR MARRIAGE LICENSE

No	268
File_	402
	Date of Application

HENDRICKS

.... Circuit Court

Form Prescribed By Indiana State Board of Application FOR M	MARRIAGE LICENSE File 42	
of I.C. 31-1-3-2 HENDRICK	County Date of Appl	
Effective July 1, 1977		The state of the s
MALE	FEMALE Medical Examination Report Dated	
Medical Examination Report Dated	Name of Physician D. B. Haggard	
Name of Physician D.B. Hasgard ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whose the prescribed presc	procures the issuance of a license to marry by any false statement, represent	atation or pretens
A NEW PRED 1 C 31-1-3-6 prescribed "False statement - who	FEMALE APPLICANT	
Shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	First Middle	Last
Last	Selde Some	Suess Year
Name First Middle Cretz Date of Birth Month Day Year	Date of Birth	63
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)	
City County State	Residence Address Street or R. R. City County	State
Residence Address Street or R. R. Rd. Fadpls.	Previous Marital Status: Never Married OR	
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment	
Last Marriage Ended By: Death Divorce Annulment Annulment	Date of birth verified by: Birth Certificate Judicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree		
Other (Specify) Rivers Lic,	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes \(\text{No} \) Yes \(\text{No} \)	If answer is "yes", has the adjudication been removed?	No□ Yes
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease?	No X Yes
2. Are you afflicted with a transmissible disease? No Pare you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?	No Yes
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor?	No A Yes
5. Are you now under the influence of a narcotic drug?	Are you now under the influence of a narcotic drug? List the full names of any dependent children.	140 =\ 1es
6. List the full names of any dependent children.	6. List the full names of any dependent	
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above dependent children?	No□ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactor	y proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.	
8. Full name of father Robert C. Freiz	8. Full name of father	
Residence of father (if deceased so state)	Residence of father (if deceased so state)	
Birthplace of father (State or foreign country) Wicking and	Birthplace of father (State or foreign country)	
9. Full maiden name of mother Patricia N. Waldo	9. Full maiden name of mother Jose Fengling	
Residence of mother (if deceased so state) 1 10 4 5.	Residence of mother (if deceased so state)	<u> </u>
Birthplace of mother (State or foreign country) Michigan	Birthplace of mother (State or foreign country)	
State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Ss: I depose and state the in this application is	information giv
	a fall allegan	
Signed New Address The Dord S		
Subscribed and sworn to before me this	Suess , hereby g	ive my
1 14	O //	
CONSENT OF PARENTS, PARENT OR GUARDIA Mydaughlu	, Debbie Jo Sucos	
We, the parents, of this applicant hereby give conse marry	Propelly Sont	
signs, state facts which render the consent of the c		
	6 1.4	
	Decald & Sur	22
Subscribed and	d sworn to before me this 10 d day	of Jun
State of Indiana,		0
County of HENDRICKS ss:	Mill D & Bet	- unla
Signed	Notary P	ublic
Signed Mother	Nodary	
Subscribed and sworn to before me this	Signed	
agy of, 19	Subscribed and sworn to before me this day of	, 19
Clerk		Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the chare now	ned parties, t
County	and I	and fil
nauthorizes and directs the issuance o	of a marriage license to the above named parties.	
RETURN OF MARRIAGE LICENS	E AND MARRY OF	
		Circuit Cou
The state of the s		
se it further remembered, the following marriage certificate was find:	ind Secole Guess	
one thousand nine hundred and 8	hereby certify that on the 27	
ne thousand nine hundred and S	at Indals day of switch	(lon)
nne thousand nine hundred and S State of Indiana, Groom Lewis Fretz and, Bride Deble Guess	of Hend County of W	
vere by me united in marriage as authorized by a marriage license issued for	Marion County, State of 10	
		RICKS
Dated this day of June , 1981	our of	
	Signed Hubert Greek	****************
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Pastol	
the state of Indiana this	day of	180

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

MALE A COL	Pate of Application
Medical Examination Report Dated 6-8-81	PEMALE
Name of Physician Gerald M. De Wester	Medical Examination Report Dated 6-8-81
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement"	Name of Physician Gerald M. De Westen MA
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation
First Middle	
Name Scott B. Suller of	Name Eirs0
Date of Birth Mouth Day Year	Date of Birth Mort
Place of Birth (State of foreign country)	Day Year
Residence Address Street or R. R. City County O State	Place of Birth (State or foreign country) Residence And artinovelle (In)
P#1 Box 269 mooresville In	Residence Address Street or R. R. City County O State
Previous Marital Status Never Married OR Yoland Pa	They Ha. Monesvelle In.
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married DOR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Ves	Other (Specify)
165	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes Yes No Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes U	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes O	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes D	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support,	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Myron C. Sellers	compliance with any court order or orders issued for their support. 8. Full name of father Anald & Appland
Residence of father (if deceased so state) Mosseswille, In.	Manual ill , las
1 In also as a	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Sndlana
9. Full maiden name of mother Ous 6. Sulvens	9. Full maiden name of mother Sephene allmen
Residence of mother (if deceased so state) Montavelle, Sw	Residence of mother (if deceased so state) Mosteswelle, Se
Birthplace of mother (State or foreign country) Indiana	Birthplace of mother (State or foreign country)
State of Indiana, I denote and state the information given	State of Indiana, I depose and state the information given
County of HENDRICKS in this application is true and correct.	County of HENDRICKS 88: in this application is true and correct.
Scott & Sellers	Signed & Cherri R. Copeland
Signed A	New Address
New Address (D+1)	Subscribed and sworn to before me this 10th day of June 1981
Subscribed and sworn to before me this // Ct/Oday of 190.	Subscribed and sworn to before me this. HENDRICKS
Thany Jane Russell Clerk HENDRICKS Circuit Court	Mary Care Russell Clerk HENDRICKS Circuit Court
	TARRITO DADEN'T OP CHARDIAN
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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS } ss:	State of Indiana, HENDRICKS ss:
County of HENDRICKS	Signed
Signed	MotherMother
Signed Mother	Signedday of, 19
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 19 Clerk
Clark	
	T. A marriage license having been refused to the above named parties, the urt by written order issued. 3 day warm and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	marriage license having been refused to the above and filed urt by written order issued. 3 day warve and filed
HENDRICKS County Superior Cou	irt by written order issued
in 1914 A 1915 A	f a marriage needs of
CONTOR	AND MARKIAGE CHILLIAN HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the
of Indiana dated the	14001 (200/200)
of Indiana dated the day of an August and Be it further remembered, the following marriage certificate was filed in my of I, h	rd. Cherry to wit:
be it further remembered, the following marriage certificate was filed in my of	ereby certify that on the day of day of
Be it further remembered, the following marriage certificate was filed in my of I, hone thousand an analysis one thousand an analysis of the second s	ereby certify that on the, County of Hend.
Sund nine hundred and	of Tena
state of Indiana, Groom Scott Sellers	Mocaan County, State of HENDRICKS
and, Bride Chorri Capeland of	to Country of
	hat purpose by the Clerk of the Circuit Court of
Committed in marriage as authorized by a marriage technique	County, State of IN HENDRICKS hat purpose by the Clerk of the Circuit Court of ICA
County. Dated 4:	1. signed William R. Clayton
County. Dated 41:	1. signed William R Clayton
Comme united in marriage as authorized by a marriage technique	1. signed William R. Clayton

APPLICATION FOR MARRIAGE LICENSE

Date of Application

HENDRICKS

... Circuit Court

Form Prescribed By	FOR MA	RRIAGE LICENSE	File	
Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of Apr	plication
		FEMALE Medical Examination Report Da	ated 6-2-	8/
MALE Medical Examination Report Dated 4-2-8/	_	11/201	Churando	
Name of Physician W. Edwords	_	Name of Physician	language follow destructions and annual	
Name of Physician W. Edwords ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False state avgreeding five hundred dollars (\$500,00)".	ment-Whoever	procures the issuance of a license to marry	by any taise statement, repres	entation or pretense
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed a shall be fined in any sum not exceeding five hundred dollars (\$500,00)".		FEMALE	APPLICANT	
MALE APPLICANT		Name First	Middle	Last
Name First Middle Flick	3	Thacea	Day '	Year
Date of Birth Month Day Year		Date of Birth	70 /9	159
Dee d1 1755		Place of Birth (State or foreign country)	And.	
Place of Birth (State or foreign country) Washington, Indiana County St	tate	Residence Address Street or R. R.	Eny Count	ty State
Residence Address Street or R. R. Bronousburg	fuel	320 9. 11111	- CHOWA SOLVE	1
3do 75tono de 1		Previous Marital Status: Never Married OR	Annulment D	
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment		Last Marriage Ended By: Death Divorce Date of birth verified by: Birth Certificate	Undicial Decree	
Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by:	0 -	
		Other (Specify)	License	
Other (Specify) Drivers Les W/Per	≥ Yes□	1. Are you now or have you ever been adjudged to	to be of unsound mind?	No P Yes D
1. Are you now or have you ever been adjudged to be of unsound mind:	□ Yes □	If answer is "yes", has the adjudication been re	emoved?	No D Yes D
If answer is "yes", has the adjudication been removed:	☑ Yes □	2. Are you afflicted with a transmissible disease		No ♥ Yes □
2. Are you afflicted with a transmissible disease:	☑ yes□	3. Are you related to the male applicant closer the	han second cousin?	No Yes 🗆
2 Are you related to the female applicant closer than second cousin.	Ø Yes□	4. Are you now under the influence of intoxication		No W Yes D
Are you now under the influence of maxicating liquid. Are you now under the influence of a narcotic drug?	, Ø Yes □	5. Are you now under the influence of a narcotic		No Yes D
6. List the full names of any dependent children.		6. List the full names of any dependent children		
Roger Flich # 6			- 1145	
Carl Flish 4			F. 8141	
- Coay grace				
		7. Are you required by any court order or order	s to support the above	
 Are you required by any court order or orders to support the above dependent children? No	□ Yes □	dependent children?		No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory proof tha	t you are in	If answer is "yes", it is required that this Appl		tory proof that you are in
compliance with any court order or orders issued for their support.		compliance with any court order or orders iss	sued for their support.	
8. Full name of father Mowin C. Flick	1	8. Full name of father (1905)	Segun	1
Residence of father (if deceased so state) Indianapolis Ind.		Residence of father (if deceased so state)	Judpy , 4	he
Birthplace of father (State or foreign country) Andlagea		Birthplace of father (State or foreign country)	ya.	
9. Full maiden name of mother Grace E. Baker		9. Full maiden name of mother	sy Bolen	
Andian polis by		(mark	
Residence of mother (if deceased so state) Wallandjiacus , and		Residence of mother (if deceased so state)	The state of the s	
Birthplace of mother (State or foreign country) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Birthplace of mother (State or foreign country)		
State of Indiana, HENDRICKS I depose and state the informal in this application is true and	tion given d correct.	State of Indiana, County of HENDRICKS	ss: I depose and state to in this application	is true and correct
County of Alak			2 80-1	
Signed Coga Func	0. +	Signed Ma		B. D.
New Address 320 / Online Drawn	rorug	New Address3.20	1 Street	n spaa
Subscribed and sworn to before me thisday of	6/8!	Subscribed and sworn to before me this	2 day of fine	192/
Mary You Russell Clerk HENDRICKS Cir	cuit Court	Illand and Kuss	Clerk HENDRIC	KS Circuit Cou
		1		
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 of	one parent	We, the parents, of this applicant hereby	give consent for this marriag	ge. If only one pare
signs, state facts which render the consent of the other parent unnecessary		signs, state facts which render the consen		

State of Indiana, HENDRICKS } ss:		State of Indiana,)	
County of HENDRICKS		County of HENDRICKS	} 88:	
Signed	Father	Signed		Fath
Signed				Moth
Subscribed and sworn to before me thisday of	ll l			4.8
		Subscribed and sworn to before me this	day of	
	Clerk			Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	OF COURT	A marriage 11		amed parties t
HENDRICKS County	Cou	rt by written alle i	refused to the above n	amed parties, and file
inauthorizes and directs the	e issuance of	a marriage ligant to the		····and
DETUDN OF MARKET	The second of	a marriage license to the above nan	ned parties.	
		AND MARRIAGE CERTIFICATE		at all Car
of Indiana dated the day of day of Be it further remembered, the following marriage certificate was fi	Cage ticens	c issued by the clerk of the	TILINDRICKS	Circuit Cou
Roger A. Flick		d Was some authorizing	the joining together as	husband and wi
Be it further remembered, the following marriage certificate was fi	iled in my off	fice, to-wit:	ator	
	1		4	
one thousand nine hundred and S	a	191601-	Country	Feb Hend
State of Indiana, Groom Roass A. Fick and, Bride Marchard State	0	Hend-	County of	0
and, Bride Marciage as authorized by a marriage license	of	Hend.	County, State of	2
County.	tooned jor th	nut purpose by the Clerk of the Cina	County, State of	NDRICKS
Dated this day of June	E	the Circ	uit Court of	
VXI.A.T.	, 19	Signed &	HIMIT	
The same of the sa		Signed Robert		Marian Marian
Filed and recorded in accordance with the laws of the State of Indi	iana this	Official Designation.	TUZIEN	E 1
, -144	2,000	day of July		19

111

HENDRICKS

Circuit Court

Form Prescribed By
er lik under Author
of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LIGHT

HENDRICKS HENDRICKS		File 42
A Section 1	County	Date of Application
nt.	Medical Examination Report D	lated_ 6-8-8/

MALE Medical Examination Report Dated Name of Physician_ Name of Physician. ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense."

MALE APPLICANT. MALE APPLICANT FEMALE APPLICANT d Last Date of Birth Place of Birth (State or foreign country) Previous Marital Status: Never Married OR Previous Marital Status: Never Married DOR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree Other (Specify)_ Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D 1. Are you now or have you ever been adjudged to be of unsound mind? Ne Yes If answer is "yes", has the adjudication been removed? No TYes If answer is "yes", has the adjudication been removed No Tyes 2. Are you afflicted with a transmissible disease? No Yes O 2. Are you afflicted with a transmissible disease No Tes D 3. Are you related to the female applicant closer than second cousin? No Yes O 3. Are you related to the male applicant closer than second cousin No Yes 4. Are you now under the influence of intoxicating liquor? No Yes 0 4. Are you now under the influence of intoxicating liquor No D Yes D 5. Are you now under the influence of a narcotic drug? No Pres D 5. Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children. List the full names of any dependent children. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No T Yes No Tyes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support. 8. Full name of father Awyll Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of 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 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. signs, state facts which render the consent of the other parent unnecessary... State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of .. Signed Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued... authorizes and directs the issuance of a marriage license to the above named parties. 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. I.f., authorizing the joining together as husband and wife Cheryl L. Kindred of Indiana dated the. James R. Persingerand..... Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the.... one thousand nine hundred and S. County, State of IN State of Indiana, Groom Jones of Hend 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 ..Clerk

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

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No.	272	
File		

Circuit Court

HENDRICKS

HENDRICKS County Date of Application Effective July 1, 1977 FEMALE Medical Examination Report Dated_ MALE Medical Examination Report Dated Name of Physician_ ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "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) PEMALE APPLICANT FEMALE APPLICANT Name Last Name Date of Birth Date of Birth Place of Birth (State or Place of Birth (State or foreign countr Residence Address Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify)_ □ Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No B Yes D No Yes 1. Are you now or have you ever been adjudged to be of unsound mind? No D Yes D If answer is "yes", has the adjudication been removed No□ Yes□ If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease No B Yes D No G Yes 2. Are you afflicted with a transmissible disease No & Yes D Are you related to the male applicant closer than second cousin No Yes 3. Are you related to the female applicant closer than second cousin No C Yes Are you now under the influence of intoxicating liquor No E Yes Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug No Yes D No W Yes Are you now under the influence of a narcotic drug? List the full names of any dependent children 7. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No D Yes D No O Yes O If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders compliance with any court order or orders issued for their support. 8. Full name of father_____ Residence of father (if deceased so state). Residence of father (if deceased so state) Birthplace of father (State or foreign country). Birthplace of father (State or foreign country) Full maiden name of mother_ 9. Full maiden name of mother_ Residence of mother (if deceased so state) Residence of mother (if deceased so state) Birthplace of mother (State or foreign country)_ Birthplace of mother (State or foreign country) State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct. HENDRICKS HENDRICKS County of .. County of ... New Address 5005 Subscribed and sworn to before me this HENDRICKS HENDRICKS .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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, State of Indiana, HENDRICKS County of HENDRICKS County of Father Signed. Signed. Subscribed and sworn to before me thisday of 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 Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... Circuit Court HENDRICKS of Indiana dated the .. day of June, 19., authorizing the joining together as husband and wife Charles H Green Be it further remembered, the following marriage certificate was filed in my office, to-wit: Clayton hereby certify that on the 20 one thousand nine hundred and State of Indiana, Groom Charles Lacion County, State of and, Bride Brendak & Clayton of Handrick's 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 HENDRICKS 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 Health under Authority of I.C. 31-1-3-2 Effective July 1 1977

STATE OF INDIANA APPLICATION FO

R MARRIAGE	LICENOR	No. 27
DICHE	PICENSE	700

HENDRICKS -County Date of Application FEMALE Medical Examination Report Dated.

MALE Medical Examination Report Dated_ Name of Physician_ D.B. Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense."

MALE APPLICANT Middle FEMALE APPLICANT Date of Birth Date of Birth Place of Birth (State or foreign country) Place of Birth (State or foreign country) Residence Address Previous Marital Status: Never Married Q OR Last Marriage Ended By Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree Other (Specify)_ Other (Specify)_ Are you now or have you ever been adjudged to be of unsound mind? No ₹ Yes □ 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? No Yes D No D Yes D If answer is "yes", has the adjudication been removed? Are you afflicted with a transmissible disease! No DA Yes No Tes D 2. Are you afflicted with a transmissible disease? Are you related to the female applicant closer than second cousin? No P Yes D No Yes D 3. Are you related to the male applicant closer than second cousing No W. Yes you now under the influence of intoxicating liquor? No Yes D 4. Are you now under the influence of intoxicating liquor? No Yes O Are you now under the influence of a narcotic drug? No A Yes 5. Are you now under the influence of a narcotic drug? No Yes D List the full names of any dependent children. 6. List the full names of any dependent children. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above dependent children? No D Yes D No T Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support. Residence of father (if deceased so state) Residence of father (if deceased so state) Birthplace of father (State or foreign country) Birthplace of father (State or foreign country) 9. Full maiden name of mother Wester Residence of mother (if deceased so state) Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana. I depose and state the information given in this application is true and correct. HENDRICKS County of..... Signed & Hawled Scott Rivken New Address 556 avon ove. Subscribed and sworn to before me this day of 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana. State of Ind HENDRICKS HENDRICKS County of County of. ..Father Signed. Mother Signed Signed 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 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....., 19.0/..., authorizing the joining together as husband and wife Linda A Davis of Indiana dated the...k...(...... Harold S. Rookerand.... Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the.... 1, Edwin J. Phillips one thousand nine hundred and 8County, State of Hendricks County, State of State of Indiana, Groom Harolds were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of., 19.81 Dated this. Signed .. Official DesignationClerk Filed and recorded in accordance with the laws of the State of Indiana this

Signed Man

HENDRICKS

Circuit Court

APPLICATION FOR MARRIAGE LICENSE

... Circuit Court

orm Prescribed By diana State Board of ealth under Authority APPLICAT	ION FOR M HENDRICKS	County Date of Application
I.C. 31-1-3-2 ffective July 1, 1977	HEINDRIGHT	Date of Application
Hective say		FEMALE Medical Examination Report Dated Delication Report Dated
MALE		7/1/2/
resident Dated	nd	Name of Physician
Name of Physician Junus Sulacp		a progress the issuance of a license to marry by any false statement, representation or pretense
Name of Fright DE ANSWERED, LC, 31-1-3-6 prescribed "Fal	se statement-Whoev	Name of Thyselectronic
MALE APPLICATO	Last	Name First and Wills
lame / First Middle	Elle.	Date of Birth Month Day Year
Date of Birth Month Day	145	Place of Birth (State of toreign country)
(Vergen)	- 20	fifthe francisco granustan
Place of Birth (State or foreign country) Class of R R City County	State	Residence Address William M. Drawnshing
Residence Address Street or R. R. Antille	M	Never Married OR
(Junior W)		Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Divorce		Date of birth verified by: Birth Certificate Judicial Decree
Last Marriage Ended By: Death Divorce Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by.
Date of birth verified by:	Tine I	Other (Specify) William Marke picture
Other (Specify) Mulling Market Hand	No Yes -	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D
1. Are you now or have you ever been adjudged to be of unsound mind?	No □ Yes □	If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed?	No Yes	2. Are you afflicted with a transmissible disease? Now Yes O
2. Are you afflicted with a transmissible disease?	No D Yes	3. Are you related to the male applicant closer than second cousin? No Yes D
3. Are you related to the female applicant closer than second cousin?	No Ves	4. Are you now under the influence of intoxicating liquor? No Ves O
4. Are you now under the influence of intoxicating liquor?	No ☐ Yes □	5. Are you now under the influence of a narcotic drug? No Yes 1
5. Are you now under the influence of a narcotic drug?		6. List the full names of any dependent children.
6. List the full names of any dependent children.		Navid Wells Ja
- Magall Wall		Pahent "
		1 att
		- CMA
7. Are you required by any court order or orders to support the above	No□ Yes□	7. Are you required by any court order or orders to support the above dependent children?
dependent children?		If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
If answer is "yes", it is required that this Application be accompanied by satisfactory	proof that you are in	compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support.		8. Full name of father Augmand Support
8. Full name of father Mullware for the father	0	11/1-11/10
Residence of father (if deceased so state)	776	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)
9. Full maiden name of mother Alle Jythle		9. Full maiden name of mother Mildred
dito and		Residence of mother (if deceased so state) Wistfield In.
Residence of mother (if deceased so state)		
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information give
State of Indiana, HENDRICKS 88: I depose and state the in this application is	true and correct.	County of HENDRICKS ss: in this application is true and correct
County of October 1	_	Shard & Thelle
Signed Haward W. Class	. 0 . 0	Signed State Of Diagram Or. Brown
New Address 33 William Elm 300	runsburg (h	New Address 135 Hellan D. Orow
Subscribed and sworn to before me this day of day of	, 19	Subscribed and sworn to before me this day of day of
Mary tank Susself Clerk HENDRICK	S Circuit Court	MULL LESSEL GERK HENDRICKS Circuit Co
1		AAA
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one pare
signs, state facts which render the consent of the other parent unnecessa		signs, state facts which render the consent of the other parent unnecessary
signs, state facts which female the consent of the state parent dimension		signs, state racis which render the constitutions

State of Indiana.		State of Indiana,
County of HENDRICKS ss:		County of HENDRICKS 58:
Signed		Fa
	Father	Signed
Signed		Signed
Subscribed and sworn to before me this day of day	, 19	Subscribed and sworn to before me thisday of19.
	Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY O	RDER OF COU	JRT. A marriage license having been refused to the above named parties,
HENDRICKS County	(Court by written order issued and
in authorizes and di	rects the issuance	of a marriage license to the above named parties.
		GE AND WARDLAND CONTROL OF
the membered, there was filed in my offi	ce a marriage lic	ense issued by the clerk of the HENDRICKS Circuit
of Indiana dated theday of	nene	authorizing the joining together as husband and
100010	/	
Be it further remembered, the following marriage certificate	e was filed in my	office, to-wit:
1, Dio Leanon		hereby contify that and the
State of Living		at strend the day of Hamilton of Hamilton County of Hamilton
and Prile	Jalls	of Hendricks County State of Jo
1000	of	Hondrick
County.	license issued for	or that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of June	0	\
uay of Sure	, 19	
Filed and recorded in accordance with the laws of the State	of Indiana 11:	Official Designation Wister 1981
, , ,	, -natura tris	day of June

Form Prescribed By Indiana State Board of Health under Authority of IC 31-1-3-2 Effective July 1 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS File . 42 __County 6-12-81

MALE Medical Examination Report Dated 5-16-81	FEMALE Date of Application
Name of Physician William Lughes	FEMALE Medical Examination Report Dated 5-16-8
Name of any	Name of Physicial 1/2/2
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Dever procures the issues
MALE APPLICANT	Il state issuance of a license to marry by any false statement, representation or pretense
Name First Middle Q Last	Name FEMALE APPLICANT
Date of Birth Month Par 10 Year	Middle M
Place of Birth (State or foreign country)	Date of Birth Month Day Duckam
Pullance Address Street or R. R. Site	Place of Birth (State or foreign country)
803 16 W Groadway, Princeton Lilyon State	Residence Address Street or R. R. City
Previous Marital Status. Never Married OR	G. Silden Drownslung Hendrich Sual
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth world Annulment Date of birth Annulment Date o
Other (Specify) # 3 141	Date of birth verified by: Birth Certificate Judicial Decree
Am you now or have you ever been adjudged to be of unsound mind?	Other(Specify) #2384
If answer is "yes", has the adjudication been removed? No Ves No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No. Yes -	2. Are you afflicted with a transmissible disease? No. Yes No. Yes
4. Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug?	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No. Yes
5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No. Yes
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	No Ves O
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Might Horace Gaton	8. Full name of father Wolah hale Duchain
Residence of father (if decreased so state) 411 School St., Brownshing In	
Birthplace of father (State or foreign country Adlana	Birthplace of father (State or foreign country) Molecula A
9. Full maiden name of mother Marcella Jane Patton	hoting of the Vtallage
Residence of mother (if deceased so state)	9. Full maiden name of mother full state Village Village Village
adia us.	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct.
New Address 803-16 W Brondlung Princeton Subscribed and sworn to Office me this 12 day of June 19 19 Way an Well Gerk HENDRICKS Circuit Court	New Address 803-110 W Britishury Princel Subscribed and sworn to before me this 10 day of ture 19.7. May Jane Russell Clerk HENDRICKS 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 parent	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.	signs, state facts which render the consent of the other parent unnecessary
Note of L. P.	State of Indiana, DOLONG
Sounty of HENDRICKS 85:	County of
	SignedFather
V B 17 C	Signed Mother
Signed Mother	Subscribed and sworn to before me this
ubscribed and sworn to before me thisday of 19	Subscribed and sworth & Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the
TENIOPIC VS.	irt hy written order ibbas
the indicate of	a marriage necessor
DETURN 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 se issued by the clerk of the 19 8 , authorizing the joining together as husband and wife
Be It Remembered, there was filed in my office a marriage licens Indiana dated the day of	, 19 authorizing the joining cogeties as the
Indiana dated theday ofan e it further remembered, the following marriage certificate was filed in my ofh	dLORIABUKCHAPI
I further remembered, the following marriage certificate was filed in my of	ereby certify that on the2.7day ofJUNE
JERRY R. NASH	t BROWNSBURG County of INDIANA
tate of I is	GIBSON COUNTY, State of INDIANA
tate of Indiana, Groom STEVEN C. EATON of Had, Bride LORI A. BURCHAM of Here by me with the street is sued for the	IENDRICKS County, State of HENDRICKS
ere by me united in marriage as authorized by a marriage license issued for thounty.	rat purpose by the Clerk of the Circuit Court of
me united in marriage as authorized by a marriage mental	
ated this 27 day of June , 19	
	official Designation
iled and recorded in accordance with the lang of the State of Indiana this	29 day of JUNE Clerk MARY JANE RUSSELL Circuit Court
th accordance with the laws of the other	Signed Circuit Court

APPLICATION FOR MARRIAGE LICENSE

276 42 Date of Application

orm Prescribed By diana State Board of ealth under Authority I.C. 31-1-3-2 ffective July 1, 1977 APPLICATION FOR M HENDRICK	S County Date of Application
	FEMALE Medical Examination Report Dated
MALE Medical Examination Report Dated	Name of Physician Scuadole
Name of Physician Secretary "False statement - Whoe	ever procures the issuance of a license to marry by any false statement, representation or pretent
	FEMALE APPLICANT
MALE APPLICANT	First COVQ Middle Last
ame First Middle Skinger	Craft terra Dev Vait
ate of Birth Month Day Year	Date of Birth Month S S S
lace of Birth (State or foreign-country)	and lova
Street or R. R. City County State	Residence Address Street or R. R. City County State
10026 Bacara Indos.	Provious Marital Status: Never Married OR
revious Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
ast Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Drivers die
Other (Specify) Survey Lec No A Yes -	1. Are you now or have you ever been adjudged to be of unsound mind: No May Yes
Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
Are you efflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease No ▼ Yes 3. Are you related to the male applicant closer than second cousin? No ▼ Yes
Are you related to the female applicant closer than second cousin? No Yes No Yes No Yes	3. Are you related to the male applicant closer that 4. Are you now under the influence of intoxicating liquor? No Yes Yes
Are you now under the influence of intoxicating fiquor:	5. Are you now under the influence of a narcotic drug? No Yes
Are you now under the influence of a narcotic drug? List the full names of any dependent children.	6. List the full names of any dependent children.
Nows	Doro
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Full name of father down Stune	8. Full name of father James Wilkinson
Residence of father (if deceased so state) Florida	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother Janet M. Hall	9. Full maiden name of mother Geroldius Jackins
Residence of mother (if deceased so state) Indpls. Ind.	Residence of mother (if deceased so state) ow Castle Ind.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, I denose and state the information given	State of Indiana, I depose and state the information gi
County of HENDRICKS ss: in this application is true and correct.	County of
Signed & Chrus Skinner	Signed & Inera Craft
New Address 10026 BACARA JX	New Address 1000 6 Bacara St.
Subscribed and sworn to before me this day of , 1957.	Subscribed and sworn to before me this 12 day of June 18
Many Jane Rendell Clerk HENDRICKS Circuit Court	May Jane Russ Of Clerk HENDRICKS Circuit C
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
Ve, 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 pa
igns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
	signs, state facts which fender the consent of the other party of
county of HENDRICKS ss:	State of Indiana, County of HENDRICKS
	County of
Signed Father	Signed Pa
Signed	Signed
	Subscribed and sworn to before me this day of 19
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties,
TILINDRICKS County (Court by written order issued
nauthorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE
2. Lientemotite, there was filed in my office a marriage lice	ense issued by the clerk of the HENDRICKS Circuit C
CHRIS L. SKINNER	, 19 authorizing the joining together as husband and
Be it further remembered, the following marriage certificate was filed in my	and TREVA S. CRAFT office, to-wit:
, manual de la	howels, and if all
twitter ou with	at STILESVII.I.E HENDRICKS
DATINER	of MARION TH
of	MARTON
County.	r that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 20x0 day of JUNE , 19	81.
	Signed Tom McGilliard

Official Designation......Minister

Signed MARY JANE RUSSELL

..... Circuit Court

HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

File 42

	Date of Application
MALE Medical Examination Report Dated 6-9-81	PEMALE
Name of Physician E.D. Clark	Medical Examination Report Dated 6-9-81
Name of Physician	Name of Physician IF. O O I at
1. OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement-	Whoever procures the issuance of a license to marry by any false statement, representation or pretense
L QUESTIONS MUST BE ANSWERED. IC. 31-13-5 prescribed False statement- ill be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Il a license to marry by any false statement, representation or pretense
Middle 2	Name FEMALE APPLICANT
me Torry W. Tanon	First Middle
te of Birth Month Day Year	Date of Birth Month E. Jones
ace of Birth (State or foreign country)	Place of Birth (State or foreign country)
714.	To the state of th
sidence Address Street or R. R. City County State	Residence Address Street or R, R. City County State
evious Marital Status: Never Married OR	Canonia Canonia
evious Marital Status Sever marital Status	Previous Marital Status: Never Married OR
st Marriage Ended By Datas: ste of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers Lio	- Other (Specify) Privers Lic
Are you now or have you ever been adjudged to be of unsound mind?	
If answer is "yes", has the adjudication been removed? No D Ye	If answer is "yes", has the adjudication been removed? No Yes No Yes
Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No X Yes D
Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin?
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No P Yes
Are you now under the influence of a narcotic drug? No Ye	
List the full names of any dependent children.	6. List the full names of any dependent children.
Kameran Toney	E Kameran Toney
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children.	dependent cinidren.
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you a	compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support. Full name of father to Carry to rey	8. Full name of father tenether take
Full name of father	- I will a T. D
Residence of father (if deceased so state) Dashille EN	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) . Va.	Birthplace of father (State or foreign country)
Evolun Robin Son	9. Full maiden name of mother Francis M. Huttord.
Full maiden name of mother	
Residence of mother (if deceased so state)	Residence of mother in decembers
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana. State of Indiana. I depose and state the information g in this application is true and correct the interval of the state of the interval of	State of Indiana, HENDRICKS State of Indiana, HENDRICKS Section 1 Section 2 Section 2 Section 2 Section 3 Secti
County of HENDRICKS ss: in this application is true and cor	County Samuel
2 2 4 mm	Signed X fut Torry
Signed X June J.	New Address 245 5 washing for 54 Dquville,
New Address	12 110
Subscribed and sworn to before me this day of 19.	Subscribed and sworn to be state of Clerk HENDRICKS Circuit Court
Mary Jana Russall Clerk HENDRICKS Circuit C	
	DARENT OR GUARDIAN
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 pa	We, the parents, of 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, HENDRICKS
State of Indiana,	County of
County of HENDRICKS \$ ss:	Signed
Signed Fa	ather Mother
м	other Signed day of 19 19
Subscribed and sworn to before me thisday of19	
	Clerk
TOTAL OF	COURT. 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	Court by written order issued
HENDRICKS County	area of a marriage license to the above named parties.
authorizes and	- MARRIAGE CERTIFICATE HENDRICKS Circuit Court
PETURN OF MARRIAGE L	ICENSE And by the clerk of the
Be It Remembered, there was filed in my office a marria	ge license issued of 198/, authorizing the joining together as hasound
of Indiana dated the 12 day of June	JUDY E. TONEY
The part of the state of the st	ge license issued by the clerk of the gelicense issued by the clerk of the joining together as husband and wife JUDY E. TONEY and JUDY E. TONEY in my office, to-wit: 2nd day of HENDRICKS
Be it funtham certificate was for	tifu that on the
I, JOHNIE EDWARDS	PLAINFIELD INDIANA
One thousand it is a second of the second of	HENDRICKS COUNTY, STATE INDIANA
State of Indiana Crown TERRY W. TONEY	of County, State of HENDRICKS of HENDRICKS HENDRICKS HENDRICKS 19. 81. Signed JOHNIE EDWARDS
and, Bride	of by the Clerk of the Circuit Court of
were have a little TONE I TONE I agrigate license issu	ied for that P
County County	81 CUNTE EDWARDS
County. Dated this 17th day of JUNE,	19. 81. Signed JOHNIE EDWARDS Official Designation MINISTER ,19. 81.
and of	Official Designation MINISTER , 19 81 Official Designation JULY , 19 81 this MARY JANE RUSSELL Clerk HENDRICKS Circuit Court
and the state of t	Official Designation JULY 6th day of MARY JANE RUSSELL HENDRICKS Circuit Court
Filed State of Inauana	TILI DON'T

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

APPLICATION FOR MARRIAGE LICENSE

No	278	
File	42	
	18-61-2	-

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

HENDRICKS	County Date of Application
	FEMALE Medical Examination Report Dated 6-3-8
	Name of Physician Studder

MALE Medical Examination Report Dated	Name of Physician Scholder
Name of Physician Scandde	ver procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—whose	FEMALE APPLICANT
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 pt. (8500.00)". shall be fined in any sum not exceeding five hundred dollars (8500.00)". MALE APPLICANT	Name First Middle Last
Name First Middle Rader	Patricia Gi Whitesid
Day Year	pate of Birth
Date of Birth (State or foreign country)	Place of Birth (State or foreign country)
City County State	Residence Address Street or R. R. City County State
Residence Address Street of R. R. Street of R. R. Brownsburg	Previous Marital Status: Never Married □ OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by:	# Other (Specify) Drivers Lic
Other (Specify) Drivers ic No R Yes D	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O
1. Are you now or have you ever been adjudged to be of unsound mind? No Pres No Pres If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No Ves O
No 94. Yes 1	2. Are you afflicted with a transmissible disease? No N
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No ♥ Yes □ 4. Are you now under the influence of intoxicating liquor? No ♥ Yes □
4. Are you now under the influence of intoxicating liquor:	5. Are you now under the influence of a narcotic drug? No Yes
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.	6. List the full names of any dependent children.
Eugene Edward Rader	Down Whiteside
	Chery "
	Timothy 11
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Eugene M. Rader	8. Full name of father Call W. Johnson
Residence of father (if deceased so state)	Residence of father (if deceased so state) Indoors. Ind.
Birthplace of father (State or foreign country) Ind	Birthplace of father (State or foreign country) Ilinois
9. Full maiden name of mother Hornetta Ford	9. Full maiden name of mother Lucille Pode
Residence of mother (if deceased so state) Ind plant Ind	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana. HENDRICKS Mas: I depose and state the information given in this application is true and correct.
County of TENDRICKS In this application is true and correct.	County of 112 County of 112 for 1
Signed thing of the thing	Signed X Jallice & Mullice M.
New Address / A Sufferson Drownsburg	New Address 11 Au Jefferson S. Dundu
Subscribed and sworn to before me this day of June 1981.	Subscribed and sworn to before me this day of
Many Jone Russell Clerk HENDRICKS Circuit Court	May Jane Russell alerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS
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
HENDRICKS COUNTY HENDRICKS	RT. A marriage license having been refused to the above named parties, the
in	Court by written order issued and filed
authorizes and directs the issuance	of a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit Court And wife
9)	10) hashand and wy
Be it further remembered, the following marriage certificate was filed in my	and PATRICIA G. WHITESIDE
I, FLOYD SMITH	opice, to-wit:
one thousand nine hundred and 81	hereby certify that on the 11 day of JULY LAWRENCE MARION
State of Indiana, Groom PHILIP F. RADER	of HENDRICKS , County of IN
and, Bride	hereby certify that on the 11 day of JULY at LAWRENCE , County of MARION of HENDRICKS County, State of IN HENDRICKS County, State of IN County, State of IN
Dated this 11 JULY JULY 19	81
, 19	Signed FLOYD SMITH
Filed and recorded in accordance with the laws of the	Official Designation JUDGE
the laws of the State of Indiana this	1.3 day of 7
	Signed MARY JANE DIJCCETT
	HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Effective July 1, 1977 HENDRICKS -County MALE Medical Examination Report Dated Date of Application FEMALE Medical Examination Report Dated Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense."

MALE APPLICANT. Name of Physician FEMALE APPLICANT Date of Birth Place of Birth (State or foreign country) Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D 1. Are you now or have you ever been adjudged to be of unsor If answer is "yes", has the adjudication been removed? No B Yes No Yes If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? No D Yes D No Yes 2. Are you afflicted with a transmissible disease No Yes 3 Are you related to the female applicant closer than second cousin? No Ves 3. Are you related to the male applicant closer than sec No D Yes D 4. Are you now under the influence of intoxicating liquor? No Ves D 4. Are you now under the influence of intoxicating liquor? No Yes D 5. Are you now under the influence of a narcotic drug? No P Yes D 5. Are you now under the influence of a narcotic drug? No Ves D 6. List the full names of any dependent children. 6. List the full names of any dependent children.

7.	Are you required by any court order or orders to support the above dependent children? No Yes	Are you required by any court order or orders to support the above dependent children?
	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by
8.	compliance with any court order or orders issued for their support. Full name of father Arles Andrew	compliance with any court order or orders issued for their support.
	Residence of father (if deceased so state)	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9.	Full maiden name of mother Mayorif Jaw Parks	9. Full maiden name of mother Mary Alltres
	Residence of mother (if deceased so state) / Mully full,	Residence of mother (if deceased so state)
	Birthplace of mother (State or foreign country) Thre Walle St	Birthplace of mother (State or foreign country)
Sta	ate of Indiana, I depose and state the information given	State of Indiana,
Co	unty of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS Signed Apple 1

CONSENT OF PARENTS, PARENT OR GUARDIAN

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

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

	dependent children?	No□ Yes □
	If answer is "yes", it is required that this Application be accompanied by satisfactor	ory proof that you are i
ı	compliance with any court orders or orders issued for their support.	
ı	8. Full name of father Harra	n
	Residence of father (if deceased so state)	· In
	Birthplace of father (State or foreign country)	
	9. Full maiden name of mother Mary Alltree	eble
	Residence of mother (if deceased so state) Allen a pale	1 - Ja
	halil	and the same of th
	Birthplace of mother (State or foreign country)	7
	State of Indiana, HENDRICKS 88: I depose and state the in this application is	
	Mary Mily	10-1
1	Signed Signed	
	New Address +3/12/10/1	
	19 (/11)	· · · ·
П	Subscribed and sworn to before me this day of	A 19

CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS

Mother

Clerk

Circuit Court

HENDRICKS

COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County Sup | Court by written order issued 3-day wasse and filed HENDRICKS ...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. authorizing the joining together as husband and wife of Indiana dated the... Karron and Daney Be it further remembered, the following marriage certificate was filed in my office, to-wit:hereby certify that on the. one thousand nine hundred and...... State of Indiana, Groom Oagle of Hendric were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County.

Signed

Dated this. Official Designation.

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

APPLICATION FOR MARRIAGE LICENSE

...Circuit Court

HENDRICKS

No. 280

Health under Authority HENDR	R MARRIAGE LICENSE County File
Effective July 1, 1977	FEMALE Medical Examination Report Dated (9-8-8)
MALE Garage Papert Dated	***************************************
Medical Examination Report Dated	Name of Physician
Name of Physician The ANSWERFD, LC, 31-1-3-6 prescribed "False statement—V	Whoever procures the issuance of a license to marry by any false statement, representation or pretent
hall be fined in any sum not extend	
MALE APPLICANT	Name Figst Middle Deven
Name Vander	Date of Birth Month Day Year 1959
Date of Birth Month Day 1958	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address Street or R. R. City County State
tesidence Address Street or R. R. Gity County Strate App Any 171-3 Clayton Hend. Snot.	go box day clayar hand Ind
1, 101	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR ast Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by:
Oriners Linense Upicture	Other (Specify)
Other (Specify) No Yes No Y	10
No 2 jes -	
No Yes 2. Are you afflicted with a transmissible disease?	
3. Are you related to the female applicant closer than second cousin:	S. Alt your and the second sec
4. Are you now under the influence of intoxicating liquor:	5. Are you now under the influence of a narcotic drug? No Yes
Are you now under the influence of a narcotic drug? List the full names of any dependent children.	6. List the full names of any dependent children.
Life the 1411 manner of any deposits	
Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support. Full name of father Damuel Classey and Anderson	8. Full name of father Richard James Newerle
Do my too and	Residence of father (if deceased so state) Blfd Ind
Residence of father (if deceased so state)	Birthplace of father (State or foreign country) H. Mayre Inel
Birthplace of father (State or foreign country)	(And There that
Full maiden name of mother 11 1000 Clear to 1000	9. Full maiden name of mother Pollad June
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, HENDRICKS A sa: I depose and state the information given in this application is true and correct	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given this application is true and correspond to the county of t
4 Ander B Anderson	2 de de la constante
New Address P.C. Box 224 Llaston Ind	New Address P.O. Bx 204 Clauters
15 /2.6.8	15 China
Mary and Russell Glerk HENDRICKS Girevit Cour	Mary Care Start And HENDRICKS
Clerk HENDRICKS Circuit Cour	t / Aug Sand Care Clerk HEIDNICKO Circuit d
ONSENT 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 paren	
igns, state facts which render the consent of the other parent unnecessary	
	Signal state facts which related the consent of the other party
county of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed	
Signed Mother	
ubscribed and sworn to before me thisday of19	Subscribed and sworn to before me this day of 19.
Cler	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO	OURT. A marriage license having been refused to the above named parties,
HENDRICKS County CO	OURT. A marriage license having been refused to the above named parties,Court by written order issued
nauthorizes and directs the issuar	nce of a marriage license to the change of a marriage license to the change of the cha
RETURN OF MARRIAGE LICE	DNCE AND WARREN
the was filed in my office a marriage	license issued by the the things of the HENDRICKS
day of Lene	Solvend and
Be it further remembered, the following marriage cortif	and Kathleen A. Devine
one thousand nine hundred and 8	my office, to-wit: hereby certify that on the day of June day of June
State of Indiana, Groom Douglas & Andrag	at county of county of
and, Bride Kathleen H. Devine	Hendricks County, State of N County, State of N County, State of N
Dated this 20 day of June, 19	SI
, 19	signed Paul Landwerlen
Filed and recorded in	Official Designation (Atholic Triest
Filed and recorded in accordance with the laws of the State of Indiana the	is 22 day of June 1981

Form Prescribed By Indiana State Board of Indiana State Board of

STATE OF INDIANA

Health under of 1C 31 1 32 Effective July 1 1977.	MARRIAGE LICENSE
Effective July 1	S County
MALE Medical Examination Report Dated 6-11-81	FEMALE Date of Application
Name of Physician Eric Clark	Medical Examination Report Dated 6-11-81
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Whoshall be fined in any sum not exceeding five hundred dollars (\$500,000". MALE APPLICANT	
shall be fined in any sum not exceeding five hundred dollars (8500,00)".	ever procures the issuance of a license to marry by any false statement, representation or pretence
Name First, Middle	FEMALE APPLICANT
Date of Birth Month Day Year Year	Name (Fifet Middle Last
Place of Birth (State or footign gountry)	Date of Birth Month Pay Cummins
Theres said.	Place of Birth (State or foreign country)
Residence Address 40 Ramona pr. Sulph Coughty State	Residence Address Street or R. R. C.
Previous Marital Status Never Married OR	To Gretich au Banvelle Genel State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Other Specify Drivers secence W/ praturo	
1. Are you now or have you ever been adjudged to be of unsound mind? No Ves D	1. Are vous now or have well as the state of picture
If answer is 'yes' has the adjudication been removed? No D yes D	1. Are you now or have you ever been adjudged to be of unsound mind? No □ Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □
2. Are you afflicted with a transmissible disease? No System No	2. Are you afflicted with a transmissible disease? No Yes Ves
3. Are you related to the female applicant closer than second cousin? No No Nes C 4. Are you now under the influence of intoxicating liquor? No No Nes C	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes D	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.
	PERSONAL PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PERSON OF THE P
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children" No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes
compliance with any quart order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father foreph flary M Cullough	8. Full name of father Glorge William Cummins
Residence of father (if decreased to state) Indplo Ind.	Residence of father (if deceased so state) Danville and.
Birthplace of father (State or foreign country) Areencantle Ind	Birthplace of father (State or foreign country) Qualples and
9 Full marden name of mother Mary Jane Watson	Garle Cail Colonia Shalas
Residence of mother (if decreased so state) Goldes One)	5. Full martien name of mother
Order O. D.	Residence of mother (if deceased so state)
State of Indiana,	Birthplace of mother (State or Toreign Country)
County of HENDRICKS in this application is true and correct.	County of HENDRICKS 88: I depose and state the information given in this application is true and correct.
and I had & Matullouch	Signed Charles Cummins
Now Address 9 & Bobslick Ava O	New Address 98 Growtlick the
Subscribed and sworn type fore me this & day of June 1981.	Subscribed and sworn to before me this day of June 1951.
Mary Jake Russed HENDRICKS Circuit Court	Mary and Russel Gerk HENDRICKS Circuit Court
The state of the s	
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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana.	State of Indiana, HENDRICKS ss:
County of HENDRICKS	County of
Signed	Signed
Signed Mother	Signed
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of, 19
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r A marriage license having been refused to the above named parties, the
HENDRICKS COURT CONTROL OF COURT COU	r. A marriage needs and filed art by written order issued
in discrete the issuance of	l a married
	HENDRICKS Count
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the country of the joining together as husband and wife and country of the country of the joining together as husband and wife of the country of
Indiana dated the	a lastill LADA CHIMINI
Dale Joseph M. Callocality	fice to-wit:
I,	day of day of the county of Herdricks, county of Herdricks, County, State of the County of the cou
	of Carta of
one thousand nine hundred and State of Indiana, Groom Se Toseph Me Cultough and Bride	County, State of ,
State of Indiana, Groom Sole Toseph Mc Cullough and, Bride Curring Curring Sole were by me united in marriage as authorized by a marriage license issued for to County.	HENDRICKS HENDRICKS
were by me united in marriage as authorized by a marriage license issued for t	hat purpose by the state
County. Dated this 30 day of June, 1981	Signed John P Roof Foiscopal
day of	Signed Solvest Episcopal Official Designation Prest Episcopal 1981
Filed and recorded in accordance with the laws of the State of Indiana this	5 day of August Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court

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

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

... Circuit Court

ealth under Authority	ON FOR MA	ARRIAGE LICENSE	File	-/5-8/
I.C. 31-1-3-2 ffective July 1, 1977	HEINDRICKS		Date of	Application
11151		FEMALE Medical Examination Report	Dated 6-4-8	1
MALE Medical Examination Report Dated		Name of Physician	camaroan	
Name of Physician Scamehoen		Name of Thysical	ry by any false statement, rep	presentation or pretense
Name of Physician Scanal CRN LL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False and prescribed part assenting five hundred dollars (\$500,00)".	statement - Whoever	procures the issuance	E APPLICANT	
LL QUESTIONS MUST BE ANSWERED. It is a property of the fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT		First	Migdle	_p L _{gst}
Middle Att	Last.	Name Lelly Month	Day	Year
te of Birth Month Day 1962		Date of Birth Month Place of Birth (State or foreign country)	18	1962
ice of Birth (State or forgign country)		myors	Ind.	County State
sidence Address Street or R. R. City Connty	State .	Residence Address Street or R. F	Dr. Blug	Berd Ind
8140 E. 100 10. 15 Day Acres	546	Previous Marital Status: Never Married	OR	
evious Marital Status: Never Married OR		Last Marriage Ended By: Death Divorce	□ Annulment □	
t Marriage Ended By: Death Divorce Annulment Le of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	D . 4.1	` \
During Leconse 4	sictitie	Other (Specify) Orwers	Licenso y	ucture
Are you now or have you ever been adjudged to be of unsound mind?	No Yes 🗆	1. Are you now or have you ever been adjudge	ed to be of unsound mind?	No □ Yes
Are you now or have you ever been adjudged to	No U Yes U	If answer is "yes", has the adjudication beer 2. Are you afflicted with a transmissible disea		No Yes
Are you afflicted with a transmissible disease?	No Yes	Are you related to the male applicant closer	r than second cousin?	No Yes
Are you related to the female applicant closer than second cousin?	No Yes	4. Are you now under the influence of intoxica	ating liquor?	No Yes
Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug?	No Yes 🗆	5. Are you now under the influence of a narco		No WYes
List the full names of any dependent children.		6. List the full names of any dependent childr	CII.	
		7. Are you required by any court order or ord	lers to support the above	
Are you required by any court order or orders to support the above dependent children?	No□ Yes□	dependent children?		No□ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory pro-	oof that you are in	If answer is "yes", it is required that this Ap		isfactory proof that you are
compliance with any court order or orders issued for their support.	neon	compliance with any court order or orders 8. Full name of father Sarry	Bichard	Movos
Full name of father Party name of father A	Inal	Residence of father (if deceased so state)	Brownsk	burg Sul
Residence of latiner (II deceased so state)	710.	Birthplace of father (State or foreign country	Indian	un
Birthplace of father (State or foreign country)	sur hall	Plus	this lean	Johnson
Full maiden name of mother San and a house	and	9. Full maiden name of mother	Brownsky	ra Ind
Residence of mother (if deceased so state)	nos	Residence of mother (if deceased so state)	Inden	ner
Birthplace of mother (State or foreign country) ate of Indiana, I depose and state the inf	formation given	Birthplace of mother (State or foreign count) State of Indiana,	I depose and sta	ate the information gi
ate of Indiana, HENDRICKS ss: I depose and state the infinity of in this application is true.	ue and correct.	County of HENDRICKS	ss: in this applicat	tion is true and corr
Signed & Mike Atkway		Signed	elly Gla	n Wow
New Address 8/90 E 200 N	-	New Address 814	0 E 700/N	7
abscribed and sworp to before me this banday of the	187	Subscribed and sworn to before me this.	day of	fure 100
Mary Jane Russe Ocierk HENDRICKS	Circuit Court	Mary Jane &	MASSELGER HEND	ORICKS Circuit Co
DISENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT O		74 - le ma 10
e, the parents, of this applicant hereby give consent for this marriage. If		We, the parents, of this applicant hereb		
rns, state facts which render the consent of the other parent unnecessary		signs, state facts which render the cons	sent of the other parent un	necessary
at Indian				***************************************
ate of Indiana, HENDRICKS ss:		State of Indiana, County of HENDRICKS	} ss:	
Signed	Father			Fa
Signed	- 1			
bscribed and sworn to before me thisday of				
		Subscribed and sworn to before me this.	day of	
				••••••
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORD	ER OF COUR	Γ. A marriage license having bee	n refused to the abov	e named parties,
Clerke Office authorizes and disco		urt by written order issued.	5-day We	awer and
Clerks office authorizes and direc	ets the issuance of	f a marriage license to the above n	amed parties.	
Be It Remembered, there was filed in my office	a marriage licen	E AND MARRIAGE CERTIFICAT	TE HENDRICKS	Circuit
Indiana dated the day of	116	61		
e it fruther nom am hand the fall.	a	nd Dilli	2 6 5	500.44
Richard D. Foterson	vas filed in my o	ffice, to-wit:	+	0
te thousand nine hundred and S		at Company that on the	day of Jun	2 and ricks
ne thousand nine hundred and State of Indiana, Groom State of Sold Africa	vinson	of Herdricks	, County of	TEMMINE
ad, Bride Ods ere by me united in marriage as authorized by a marriage lie	of	terdicks	County, State of	110
ounty.	, , , , , , , , , , , , , , , , , , , ,	creat purpose ou the Clerk of the C:	reuit Court of	HENDRICKS
ated this day of June	1981		,	
		Signed Richard		<u> </u>
<mark>iled and recorded in a</mark> ccordance with the laws of the State of	(I 1)			
tango of the State of	indiana this	day of	one	19 6

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

N.	28	3
No	00	~

File_

_County 6-15-81 MALE Date of Application Medical Examination Report Dated. FEMALE Medical Examination Report Dated Name of Physician Ourry ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce ☑ Annulment □ Date of birth verified by Birth Certificate Dudicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree Mers decense 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes" has the adjudication been res No G Yes If answer is "yes", has the adjudication been removed No O Yes O 2. Are you afflicted with a transmissible disease No G Yes D you related to the female applicant closer than second cousin? No B Yes D 3. Are you related to the male applicant closer than second cousin No Yes O ou now under the influence of intoxicating liquor? No Yes you now under the influence of a parcetic drug? 6. List the full names of any dependent children 7. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No D Yes D No Tyes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in 8. Full name of father Nonald Residence of father (if deceased so state) Namelle Residence of mother (if deceased so state) Wanvelle Birthplace of mother (State or foreign country) Indiana State of Indiana, HENDRICKS State of Indiana. County of are fussell Clerk 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 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. signs, state facts which render the consent of the other parent unnecessary State of Indiana, HENDRICKS State of Indiana. HENDRICKS Father COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County Superior Ct =1 Court by written order issued 3 day waver and filed 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.... ..., authorizing the joining together as husband and wife of Indiana dated the Lauren E. Lausen Be it further remembered, the following marriage certificate was filed in my office, to-wit:hereby certify that on the... one thousand nine hundred and 81 State of Indiana, Groom David 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 .Clerk Filed and recorded in accordance with the laws of the State of Indiana this ... HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

File_ 6-15-81

form Prescribed By Indiana State Board of Itealth under Authority Iteal Itea Itea Itea Itea Itea Itea Itea Itea	MARRIAGE LICENSE Gounty Date of Application
Offective July 1, 1977	FEMALE Medical Examination Report Dated 0-11-81
MALE Medical Examination Report Dated	Name of Physician Cue Clark
Name of Physician Name of Physi	ever procures the issuance of a license to marry by any false statement, representation or prete
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement = wind shall be fined in any sum not exceeding five hundred dollars (8500.00)".	FEMALE APPLICANT
hall be fined in any sum not exceeding its MALE APPLICANT	Name C First Middle Ro Last
Name de First + 60 Middle Rappolate	Date of Birth Month
Date of Birth Month 2 Day 19/3	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Address Street of R. R. County State
Residence Address Street or R. R. City County State	Residence As R R Bot 5, Fillsland, Inc
RRI BOX 5, ACTIONO, COLOR	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By Death Divorce Annulment D
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by
O in lines we picture	Other (Specify)
Other (Specify) Now Yes O	 Are you now or have you ever been adjudged to be of unsound mind? No□ Ye If answer is "yes", has the adjudication been removed?
If answer is "yes", has the adjudication been removed?	2 Are you afflicted with a transmissible disease. No. X Ye
2. Are you afflicted with a transmissible disease?	3 Are you related to the male applicant closer than second cousin" No. Ye
3. Are you related to the female applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor" No. Ye
5. Are you now under the influence of a narcotic drug?	Are you now under the influence of a narcotac drug" Not Ye List the full names of any dependent children.
6. List the full names of any dependent children.	
	7 Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children?	dependent children" No 1 If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support. 8. Full name of father Court orders issued for their support.	x Full name of father Willis Martin Coleman
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) naliancy	Birthplace of father (State or foreign country)
Full maiden name of mother Nellie Mable Randlas	9. Full maiden name of mother alta May Sallee
Residence of mother (if deceased so state) Lebanon Indiana	Residence of mother (if deceased so state) deceased
Birthplace of mother (State or foreign country) Smoleano	Birthplace of mother (State or foreign country)
State of Indiana, County of HENDRICKS Signed HENDRICKS Signed HENDRICKS New Address Market Roll Box 5	State of Indiana. County of HENDRICKS Signed Edeth Ja Randally New Address R -By 5 Pettsteing In A
Subscribed and sworn to before me this 5 day of June 198/ Mary and Pussellerk HENDRICKS Circuit Court	Mary Jane Russellierk HENDRICKS Circuit
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
	The second secon
	The state of the s
State of Indiana, HENDRICKS }ss:	State of Indiana,
County of	County of HENDRICKS
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me thisday of19	Subscribed and sworn to before me this day of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named partie
County (Court by written and the same
authorizes and directs the issuance	e of a marriage license to the above named parties.
and the state of t	SE AND MARRIAGE CERTIFICATE tense issued by the clerk of the HENDRICKS Circuit
of Indiana dated the day of	Ml 81
Be it further remembered, the following marriage certificate was filed in my	and Edith Inlies
The state of the s	
I, William Charles McGraw one thousand nine hundred and 81	at Pittsboro Sth day of JULY
one thousand nine hundred and 81 State of Indiana, Groom Hobert Edwin Ragsdale and, Bride Edith Tulia Bandale	of Hendrckks , County of IN
and, Bride Edith Julia Randall of were by me united in marriage as authorized by a marriage license issued to	Hendricks County, State of
County.	Henry of the Clerk of the Cinnis Control of the Cinnis Control
Dated this 5th day of July , 19	81
	Signed William Charles McGraw
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister 81
of Indund this	day of July

day of July

Signed ...

Mary Jane Russell

.... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31 1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

_County

MALE Medical Examination Report Dated 6-4-8/	FEMALE Date of Application
Name of Physician M. Neely	Medical Examination Report Dated 6-4-81
Name of Physician 74 7000	Name of Physician M. Mello
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoshall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the inner
MALE APPLICANT	rest the issuance of a license to marry by any false statement, representation or pretense
Name R First Middle Q Last	FEMALE APPLICANT
Date of Birth Month Day Year	Middle 1 Last
Place of Birth (State or Greign country)	Date of Birth Month Day Fredrick
provedsle Indiana	Place of Birth (State or foreign country)
Residence Address Street or R. R. Plaint: County States	Residence Addination Delio
Previous Marital Status Never Married OR	117 Forest In. Steet or R. R. Plani : Of County State
Previous Marital Status. Rever Statistics Of Annulment Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death □ Divorce □ Annulment □
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers Lie W/Pia	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	ome (openy) words of ewiffle
If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible discovery
3. Are you related to the female applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?
	4. Are you now under the influence of intoxicating liquor?
Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any pourt order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father / Exceld gene Beamon	compliance with any court order or orders issued for their support. 8. Full name of father Climan Leadness
Residence of father is deceased so state) Trencostle, Indions	0.7 10
	Residence of father (if deceased so state) Bowle, He
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Shown Comm / Moreon	9. Full maiden name of mother Ruth alice arnold
Residence of mother (if deceased so state) Suercasello, In	Residence of mother (if deceased so state) Plainfield, fu
Birthplace of mother (State or foreign country) Andiova	Birthplace of mother (State or foreign country)
	Diffulplace of mother (State of Toreign Country)
State of Indiana.	State of Indiana.
State of Indiana. County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	
HENDRICKS	State of Indiana, HENDRICKS 88: In this application is true and correct.
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Signed Bladfold Blanco Plainfields New Address 7/7 Local laze Plainfields	State of Indiana, County of HENDRICKS Signed Bours Skelpick New Address 717 Forust Law, Plainfield,
County of HENDRICKS Signed Bland C Blance New Address 7/7 Locast lane Plainfield In Subscribed and sworn to before me this day of June 198/.	State of Indiana, County of HENDRICKS Signed Borre Florust Lave Plainfield, Subscribed and sworn to before me this 15 day of Lune 19.8%
Signed Bladfold Blanco Plainfields New Address 7/7 Local laze Plainfields	State of Indiana, County of HENDRICKS Signed Bours Skelpick New Address 717 Forust Law, Plainfield,
County of HENDRICKS Signed Bladfold & Blanco New Address 7/7 House lare Plainfield In Subscribed and sworn to before me this day of June 1981. Mary Jone Russell Clerk HENDRICKS Circuit Court	State of Indiana, County of HENDRICKS Signed Borre Florust Lave Plainfield, New Address 717 Forust Lave Plainfield, Subscribed and sworn to before me this 15 day of Lune 19.8%. HENDRICKS Clerk HENDRICKS Circuit Court
Signed Bladford & Blanco Plainfield In this application is true and correct. Signed Bladford & Blanco Plainfield In New Address 7/7 House lare Plainfield In Subscribed and sworn to before me this day of June 1981. Mary Jone Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	State of Indiana, County of HENDRICKS Signed Borre Skelpick New Address 717 Forust Lare Plainfield, Subscribed and sworn to before me this 15 day of Juno 1986. Mary Jone Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN
County of HENDRICKS Signed Bladyof & Blanco New Address 7/7 House lare Plainfield In Subscribed and sworn to before me this. May of June 1981. Mary Jone Russell Clerk HENDRICKS Circuit Court	State of Indiana, County of HENDRICKS Signed Bours Flesherk New Address 717 Forust Lane Plainfield, Subscribed and sworn to before me this day of HENDRICKS Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Signed Bladford & Blanco Plainfield In this application is true and correct. Signed Bladford & Blanco Plainfield In New Address 7/7 House lare Plainfield In Subscribed and sworn to before me this day of June 1981. Mary Jone Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	State of Indiana, County of HENDRICKS Signed Borre Skelpick New Address 717 Forust Lare Plainfield, Subscribed and sworn to before me this 15 day of Juno 1986. Mary Jone Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN
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County of HENDRICKS Signed Sland C Blance Plainfully New Address 7/7 House lare Plainfully Subscribed and sworn to before me this day of 1981. Mary fore Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19	State of Indiana, County of HENDRICKS Signed Bower Skelpuk New Address 717 Forust Lane, Planfiell, Subscribed and sworn to before me this 15 day of HENDRICKS Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk Clerk Clerk Clerk Clerk Clerk Clerk
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County of HENDRICKS 38: In this application is true and correct. Signed Bladged Blance Blance Plainfully. Subscribed and sworn to before me this. 3 day of 1987. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. Father Signed Mother Subscribed and sworn to before me this day of 19 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County County of County Coun	State of Indiana. County of HENDRICKS Signed Board Skelenck New Address 7/7 Forust Gale, Plainfield, Subscribed and sworn to before me this. Core Response County of HENDRICKS Subscribed and sworn to before me this. Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. Signed 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 of a marriage license to the above named parties. Cand Marriage license to the above named parties.
County of HENDRICKS 38: In this application is true and correct. Signed Bladfold Blance Plainfellown New Address 7/7 Local lare Plainfellown Subscribed and sworn to before me this. 1981. Mary fore Russell Clerk HENDRICKS 1981. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS 88: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURHENDRICKS County	State of Indiana. County of HENDRICKS Signed Board Shelpick New Address 7/7 Forust Law Plainfiell, 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 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 fa marriage license to the above named parties. Cand Marriage license to the above named parties.
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Form Prescribed By Indiana State Board of STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

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Health under Authority of I.C. 31-1-3-2 Date of Application Effective July 1, 1977 FEMALE Medical Examination Report Dated_ Medical Examination Report Dated 6-12-81 Name of Physician_ Name of Physician Q. Oleck ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "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 Date of Birth Date of Birth Place of Birth (State Residence Address RR# Residence Address 3/53 Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate Judicial Decree Other (Specify) Drives Lic No TYes D No W Yes 1. Are you now or have you ever been adjudged to be of unsound mind If answer is "yes", has the adjudication been removed. No D Yes D No□ Yes□ If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease? 2. Are you afflicted with a transmissible disease? Are you related to the male applicant closer than second cousing Are you related to the female applicant closer than second cousing Are you now under the influence of intoxicating liquor No Yes 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 6. List the full names of any dependent children. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No Ves D dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for th Residence of father (if deceased so state) & nelloway Birthplace of father (State or foreign country) Birthplace of mother (State or foreign country) & ndiana Birthplace of mother (State or foreign country) State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct. **HENDRICKS** HENDRICKS County of ... County of New Address 3/53 HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana. State of Indiana, HENDRICKS County of. HENDRICKS County of .. Signed. Signed Signed. Subscribed and sworn to before me this ... Subscribed and sworn to before me this... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCounty.... 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 of Indiana dated the. authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: posalyhereby certify that on the one thousand nine hundred and 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 Filed and recorded in accordance with the laws of the State of Indiana this...

Official Designation

.Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS File_ ___County

MALE Medical Examination Report Dated 6-5-81	FEMALE Date of Application
Name of Physician Accepted	FEMALE Medical Examination Report Pated (1-5-8)
Name of Thysican Paris	Name of Discontinuation Report Dated (1-3-8)
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Wh	Name of Physician Auggard oever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	over procures the issuance of a license to marry by any false statement, representation and all the statement representations and the statement representation and th
Name PALL Mighte Valuet	FEMALE
Date of Birth Month Day Year Month	Name / First , Middle
Place of Birth (State or foreign country)	Date of Birth Month Synne Middle
Place of Birth (State of Totel Hounty)	Day Surner
Residence Address Street or R. R. City County - State,	1 log-ign country)
region I arrow and	Residence Address Street or R. R. C. County State
Previous Marital Status. Never Married OR	Jan Peld Sond and
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
Assembly now or have you ever heen adjudged to be of uncount. I be	Other (Specify)
Manager is "yes" has the adjudication been removed?	1. Are you now or have you ever heen adjudged to be
No Yes	If answer is "yes", has the adjudication been asset as
3. Are you related to the female applicant closer than second courses	2. Are you afflicted with a transmissible disease?
No. Yes	3. Are you related to the male applicant class of
No G Yes U	4. Are you now under the influence of it.
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children" No□ Yes□	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	No ☐ Yes ☐
compliance with any courspicter or orders assued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Clipal Seugh Semmons	compliance with any court order of orders issued for their support.
Residence of father (if deceased so state) Sholph Ind.	8. Full name of father Alan Franklin Surper
	Residence of father (if deceased so state) Plainfield Ind.
Birthplace of father (State or foreign country) Maynardville Jennessee	Birthplace of father (State or foreign country) Indiana
9. Full maiden name of mother Etna Stona Frally	9. Full maiden name of mother Carolin ann Gabel
Residence of mother (if deceased so state) Indoor Ind .	Dr. 1.11
con 1	Residence of mother (if deceased so state) Than field Such
Birthplace of mother (State or foreign country) 7 aynardwill Sennessee	Birthplace of mother (State or foreign country) Incliana
State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
O D TO THE CONTROL OF	County of in this application is true and correct.
Signed & Dy Jemmyros	Signed X centhin L. Turner
Signed Sylvan 152 H S. 9 inero	Signed X Cepthia L. Turner
New Address /524 S. Lineyord	Signed X Cepthia L. Turner New Address / 524 S. Vinger ood
Subscribed and sworm to before me this 15 day of June 1981.	Subscribed and sworm to before me this day of June 19
12-	15
Subscribed and sworm to before me this 15 day of June 1981.	Subscribed and sworm to before me this day of June 19%.
Subscribed and sworm to before me this 15 day of June 1981.	Subscribed and sworm to before me this day of June 19
Subscribed and sworm to before me this day of June 18. Mary Jane Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	Subscribed and sworp to before me this day of June 19%. Mary pare Russell Clerk HENDRICKS Circuit Court
Subscribed and sworm to before me this day of June 1981. Mary fant Cussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this. day of June 19 J. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworm to before me this day of June 18. Mary Jane Pussell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	Subscribed and sworp to before me this day of full 1921. Clerk HENDRICKS Circuit Court Court Court OF PARENTS, PARENT OR GUARDIAN
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Subscribed and sworm to before me this day of LUNE 184. Mary Park Russell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. County of HENDRICKS } ss: Signed Father Signed Mother	Subscribed and sworn to before me this. Clerk HENDRICKS Circuit Court
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Subscribed and sworm to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS ss: Signed	Subscribed and sworp to before me this Subscribed Amarriage County of
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Subscribed and sworn to before me this day of Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. Signed Father Signed Mother Subscribed and sworn to before me this day of	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 Signed Signed A marriage license having been refused to the above named parties, the rt by written order issued a marriage license to the above named parties. AND MARRIAGE CERTIFICATE issued by the clerk of the issued by the clerk of the County of County of County, state of County,

APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By Indiana State Board of Idealth under Authority of 1.C. 31-1-3-2 Infective July 1, 1977 APPLICATION FOR APPLICATION FOR HENDRIC	MARRIAGE LICENSE KS County Date of Application
1 - 21	FEMALE Medical Examination Report Dated 47-10-21
MALE Medical Examination Report Dated Name of Physician	Name of Physician Alebert Kall
Name of Physician Answered, LC, 31-1-3-6 prescribed "False statement—Wh	never procures the issuance of a license to marry by any false statement, representation or pretense.
shall be fined in any sum not exceeding	FEMALE APPLICANT
MALE APPLICANT Middle Last	Name Carla Jan Scote
Name Three Lee Marks	Date of Birth Month
Date of Birth Month Day 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	M 3 Dex 366 X numerables Pulname
010 XUMBER ASIL	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By Death D Divorce Annulment D Date of birth verified by Birth Certificate D Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by
	Other (Specify)
Other (Specify) No Ves O	1 Are you now or have you ever been adjudged to be of unsound mind? No D Yes
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Ye	If answer is "yes" has the adjudication been removed? No 7 Yes
Are you afflicted with a transmissible disease?	2 Are you afflicted with a transmissible disease. No D Yes C
No P Yes U	3 Are you related to the male applicant closer than second cousin. No D Yest 4 Are you now under the influence of intoxicating liquor? No D Yest
4. Are you now under the influence of intoxicating liquor? No D Yes D No D Yes D	5 Are you now under the influence of a naroutic drug" No Wyes
5. Are you now under the influence of a narcotic drug.	6 List the full names of any dependent children
6. List the full names of any dependent children.	
The state of the s	
7. Are you required by any court order or orders to support the above	7 Are you required by any court order or orders to support the above dependent children. No No Yes
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court orders or orders issued for their support.	compliance with any court order operators issued for their supports
8. Full name of father order Adams	8. Full name of father lifty years
Residence of father (if deceased so state) the state of t	Residence of father (if deceased so state). Millian Cartle & In 1
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Betty June fort	4 Full maiden name of mother Il Jasquet Forter
1 Danielle 1	Residence of mother is decreased so states Assessment of the state of
Residence of mother (if deceased so state)	1
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information giv
State of Indiana, HENDRICKS Ba: I depose and state the information given in this application is true and correct.	County of HENDRICKS on this application is true and corre
signed Land Ladams	Carla O Scoper
New Address	
Subscribed and sworn to before	
Subscribed and sworn to before	
fill fill fill fill fill fill fill fill	
CONSENT OF PARENTS, PA T COMO OTO Salve	, hereby give my consent for
We, the parents, of this applic	O
signs, state facts which render my daughter, Carl	a Jean Scolee
1 19 20 8 18	P
marry Daves See (1)	dama.
	0011 22 0 0
	Ufor a scoled
State of Indiana, HENDRICK ; Subscribed and sworn t	to before me this 16 Th day of fine 191
Signed	1-
Signed	Money A Claret
Subscribed and sworn to before	Notary Public
The state of the s	THOMAS G. ROACH
	1401445
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO.	URT. A marriage license having been refused to the above named parties,
County	Count has a second of the seco
in authorizes and directs the issuance	e of a marriage license to the above and and a
RETURN OF MAPPIACE LICEN	Non
of Indiana dated the	cense issued by the clerk of the HENDRICKS Circuit Co
Be it further remembered, the following marriage certificate was filed in m	authorizing the joining together as husband and u
Be it further remembered the following	and Color
one thousand nine hundred and	hereby certify that and
one thousand nine hundred and	nereby certify that on the day of Jave County of Herd County, State of Cou
State of Indiana, Groom Sould heldons	county of
ana, Bride and Scote	Put nam County, State of
were by me united in marriage as authorized by a marriage license issued f	or that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of Jane, 19.	El Cierk of the Circuit Court of

Official Designation

... Circuit Court

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

APPLICATION FOR MARRIAGE LICENSE

	County File 92
MALE Medical Examination Report Dated 6-8-81	6-16-81
	FEMALE Date of Application
Name of Physician Omes Dlack	Medical Examination P
AUDICTIONS MUST BE ANSWERED, I.C. 31s1-3-6 prescribed and	Name of Physician
shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	Dever progress the
ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	ares the issuance of a license to marry by any false statement, representation or protocol
Name First RMiddle Last	DENGAL TO THE PROPERTY OF THE
Date of Birth Month Pay Choque, A.	Name FEMALE APPLICANT
(1)	Date of Birth Amn Last
Place of Birth (State or foreign country)	Worth Villso.
Residence Addity	Place of Birth (State optoreign country) Year 1963
3559 sullaine sure, snapl, Marien Lind	Residence Address Street or R.R. Andiana
Previous Marital Status. Never Married OR	County State
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married D. O.D.
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death D D: C
D Other (Specity) Dineis livense Wifeiture	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D	Other(Specify) # 63-267460
If answer is yes has the adjudication open removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	allswer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes D	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes D	Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No. Yes	Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
	Harry market and the second se
7. Are you required by any court order or orders to support the above	
dependent children' No D Yes D	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father SCON & Olgan &.	8. Full name of father Non D. Helse
Residence of father (if deceased so state) Slessifield, Sud.	
Birthplace of father (State or foreign country) Judiana	Residence of father (if deceased so state) Strongsvelle, Okio
Werne Soll Am	Birthplace of father (State or foreign country)
9. Full maiden name of mother NOUMA Delice FAON	9. Full maiden name of mother Phyllis U. Terrell
Residence of mother (if deceased so state) MRPL, Ind.	A A A A A A A A
Birthplace of mother i State or foreign country (Un diana	Residence of mother (if deceased so state) ANOV 1
State of Indiana,	Birthplace of mother (State or foreign country) Stolicande
County of HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Bas: I depose and state the information given in this application is true and correct.
V D T	County of this application is true and correct.
Signed I deh K organ y 0 100	Signed / any Lynn Tees
New Address 3539 Therburne In Ind plb	New Address 03539 Therburne for Ondolo
Subscribed and sworm to before whe this 16 day of Julie 1807	11 ()4140 - 14120
Mary Am Russell and HENDRICKS	Subscribed and sworth worlder me this
Though the few sell clerk HENDRICKS Circuit Court	Mary Jame Kussell Clerk HENDRICKS Circuit Court
COVALUE	
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 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	signs, state facts which render the consent of the other parent unnecessary
	signs, state
State of Indiana.	A CONTRACTOR OF THE PROPERTY O
County of HENDRICKS 88:	State of Indiana, HENDRICKS County of
Signed Father	Signed
Signed Mother	Signed
Subscribed and	Subscribed and sworn to before me thisday of, 19
	Subscribed and swort to Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	the above named parties, the
TENDRICKS TO THE TENDRICKS	t be written order issued
in Clerk's Office authorizes and directs the issuance of a	by written order issuedament parties.
authorizes and directs the issuance of a	a marriage license to the above named parties.
VIV	AND MARRIAGE CERTIFICATE HENDRICKS
We It Remembered there was filed in my office a marriage license	issued by the clerk of the
Indiana dated the	f, 19. Com, and
d less & Comment of the state o	amy Lynne, These
se it further remembered in my office	ce, to-wit:
her	
me thousand nine hundred at at	Friendswood, comy
Indiana Comment of the state of	County, State of
nd, Bride Room Coom Coom Coom Coom Coom Coom Coom	endricks County, State of Malana, HENDRICKS
vere by ma	the Clerk of the Circuit Court of
Sounty. In marriage as authorized by a marriage license issued for that	1 De la de
Pated this 20 11 19 81	Was Ralph 1: Water

Signed..

Official Designation Naston Friendswood Paptist

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

APPLICATION FOR MARRIAGE LICENSE

290

Form Prescribed By Indiana State Board of Health under Authority APPLICA	TION FOR M	ARRIAGE LICENSE	File	(8-8)
f I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Date of App	lication
MALE (c - 8 - 5	81	FEMALE Medical Examination Report Da	ted (0-8-8)	
Medical Examination Report Pated	1000	Name of Physician License to marry	by any false statement, represe	entation or was
"F	alse statement—Whoeve	or procures the issuance of a fix the	APPLICANT	reaction or pretense
LL QUESTIONS MUST BE ANSWERED. IC. 31 Polymer and be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT		Name FINALE	Middle	Dust
ame First Middle	dalcomb	Date of Birth Month	Day	Nunagan Year
Vate of Birth Month Day	1960	Place of Birth (State or foreign country)	15	1963
lace of Birth (State or foreign country)			de ana County	V - St.
esidence Address Street of R. R. City County	nol Snal.	Residence Address 1160 Salem Rd	Mooresville y	norgan Ind
Now Married OR		Previous Marital Status: Never Married OR		
evious Marital Status: Never Married OR st Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce Date of birth verified by: Birth Certificate	Judicial Decree	
ate of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by		
Other (Specify)		Other (Specify) 1. Are you now or have you ever been adjudged to	he of unsound mind?	No Yes 🗆
Are you now or have you ever been adjudged to be of unsound mind?	No □ Yes □	Are you now or have you ever been adjudged to If answer is "yes", has the adjudication been re-		No Yes U
If answer is "yes", has the adjudication been removed?	No E Yes	2. Are you afflicted with a transmissible disease?		No W Yes
Are you afflicted with a transmissible disease? Are you related to the female applicant closer than second cousin?	No Yes 🗆	3. Are you related to the male applicant closer the		No W Yes O
Are you now under the influence of intoxicating liquor?	No Yes	4. Are you now under the influence of intoxicating		No Yes D
Are you now under the influence of a narcotic drug?	No Yes	5. Are you now under the influence of a narcotic of6. List the full names of any dependent children.	arug:	No Yes D
List the full names of any dependent children.		6. List the full names of any dependent children.		
Are you required by any court order or orders to support the above dependent children?	No□ Yes□	7. Are you required by any court order or orders dependent children?	to support the above	No□ Yes□
dependent children: If answer is "yes", it is required that this Application be accompanied by satisfactory		If answer is "yes", it is required that this Applic	eation be accompanied by satisfactor	
compliance with any court order or orders issued for their support.	,	compliance with any court order or orders issue	ed for their support.	
Full name of father Colliard Eugene Halcom	6	8. Full name of father	Veram Duna	egan
Residence of father (if deceased so state) Clay tor	1d.	Residence of father (if deceased so state)	Thorresulle .	Ind.
Birthplace of father (State or foreign country) Urkansas		Birthplace of father (State or foreign country)	Kentucky	
Full maiden name of mother Suo Carol Stokes		9. Full maiden name of mother Morm	a Jean Ellis	
Residence of mother (if deceased so state) Claytor, Ind		Residence of mother (if deceased so state)	Mooresville o	Ind
Birthplace of mother (State or foreign country) Indiana			Indiana.	
ate of Indiana,	information given	Birthplace of mother (State or foreign country). State of Indiana,	I depose and state the	e information given
bunty of HENDRICKS ss: I depose and state the	true and correct.	County of HENDRICKS	ss: in this application is	s true and correct.
Signed & avid Pfallomb	-	Signed & Ra	chil & ym	n Runa
New Address 1160 SAIRM ROA	d moonesci	New Address 1160 5	Alem ROAD	moorsvil
abscribed and syon to before me this 14 day of Sun	1981	Subscribed and sworn to before me this	16 day of Quin	le 1981.
Mary fre Russell Clerk HENDRICKS	SCircuit Court	Mary Jane Russ	Clerk HENDRICK	S Circuit Court
NSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR G	HARDIAN	
the parents, of this applicant hereby give consent for this marriage.	If only one parent	We, the parents, of this applicant hereby g		If only one parent
ns, state facts which render the consent of the other parent unnecessar				
	T.	signs, state facts which render the consent	of the other parent unnecessa	ary

te of Indiana,			***************************************	
HENDRICKS } ss:		State of Indiana, County of HENDRICKS	88:	
Signed	Frah			r.it.
Signed		Signed		Father
oscribed and sworn to before me this	Mother	Signed		Mother
		Subscribed and sworn to before me this	day of	19
			***************************************	Clerk
MPLETE IF MARRIAGE LICENSE ISSUED BY OF HENDRICKS County	RDER OF COURT	. A marriage license benin	ofward to the charge	ped parties, the
COORDA COUNTY BUPE	rion Cou	A marriage license having been ret by written order issued.	3-Olan LLA	UC V and filed
	cets the issuance of	a marriage license to the above name	ed parties	
Be It Remembered there was Chiling	RRIAGE LICENSE	AND MARRIAGE CERTIFICATE	na partitori	
Indiana dated the	the raige licens	e issued by the clerk of the	HENDRICKS	Circuit Court
Indiana dated the day of day o	June	, 1951, authorizing th	e joining together as hi	usband and wife
interior ett, the following marriage and contic		14		
e thousand nine hundred and 8		ereby certify that	Finn	
e thousand nine hundred and 5 ate of Indiana, Groom 5 d, Bride 5 we by me united in marriage as authorized by a marriage unity.	dma nl	Mena.	County of	1
re by me united in marriage as authorized	of	Hend	County, State of	Š,
re by me united in marriage as authorized by a marriage unity.	license issued for t	hat purpose by the Clerk of the Circuit	t County, State of	DRICKS
ted this 20 day of June	10 81	otten of the Circui	t Court of	5.5
		Signed Signed	SG. Burnsi	de
led and recorded in accordance with the laws of the State	•	Official Designation Min	ister	
the laws of the State	of Indiana this	23 day of Tiles		1881

HENDRICKS

... Circuit Court

Signed...

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31 1-32 reffering July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	091

Effective July 1 1999	KS File_
MALE (11/2 SA	County 6-16-81
Medical Examination Report Dated (0-10-8)	FEMALE Date of Application
Name of Physician Cric Clark	Medical Examination Report Dated 6-16-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Eric Clark
shall be fined in any sum and the manufed updates (\$500,000)". MALE APPLICANT	sever procures the issuance of a license to marry by any false statement, representation or presentation
Name Diohal Middle Cast	FEMALE ADDITIONS
Date of Birth Month Day Year	Migle
Place of Birth (State or (grylen country))	Date of Birth Month Day Sackett
el or viegenia	Place of Birth (State or foreign country)
Residence Address W. Wash St. Indias Rend State One	Residence Address Aug 1 Wheet of R R
Previous Marital Status Never Married OR	11013 W. alaskest Indas Hend Ind
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate U Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Other(Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O	Other (Specify)
If answer is "yes", has the adjudication been removed? No Ves C 2. Are you afflicted with a transmissible disease?	1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐ If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
16.	2. Are you afflicted with a transmissible disease? No Yes
Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Ves O	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.
The state of the s	and of any dependent children.
The Control of the Co	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children" No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Damuel A. Givens	compliance with any court greer or orders issued for their support. 8. Full name of father.
Residence of father is f deceased so state)	Residence of father (if deceased so state) Columbus, Shiw
Birthplace of father (State or foreign country) UNESLOWN	V. +.oli.
9. Full maiden name of mother Plant Imogene & titleton	Markouse Muite II
Residence of mother of decreased so states Carton, Ship	R. 1 11:
I last these	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) CUSSC CARGONICA State of Indiana.	Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
× Michael & Ciners	× Michollo D. Jackett
New Address Claimfield Ind.	New Address Hausield Ing.
10 94 M	Subscribed and sworn to before me this day of June 1981.
Subscribed and sworm to before me this day of HENDRICKS Circuit Court	Subscribed and Russell Clerk HENDRICKS Circuit Court
Circuit Court	Gerk 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 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	signs, state facts which render the consent of the other parent unnecessary
Sec. 1	Today Carlos
State of Indiana. County of HENDRICKS sa:	State of Indiana, HENDRICKS ss:
	SignedFather
Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to 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 A CO	by written order issued
in County authorizes and directs the issuance of	f a marriage license to the above hamed particles.
O MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen-	se issued by the the service of the
day of day	· michaell D.
Be it further fled in my of	fice, to-wit:
1, Ski	nereby certify that on the, County of
I,	at Dandricks County, State of Ind
Thought the comment of the comment o	
were by me united in marriage as authorized by a marriage license issued for to County.	hat purpose by the Clerk of the Circuit Court of HENDRICKS
Counts.	
Dated this	Signed James
day of	Official Designation 14 Dep. 1981
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation day of Clerk Signed HENDRICKS Circuit Court
and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

Q-16-81 Date of Application

File_

Effective July 1, 1977	/a V M
/ a M	FEMALE Medical Examination Report Dated
MALE Medical Examination Report Dated (1 - 8 - 81	C/1 0/ 10/1/2 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Name ()1 1 hysician
Name of Physician Cuonula Cammus ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Whoe	ver procures the issuance of a license to marry by any taise statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-13-3 prescribed shall be fined in any sum not exceeding five hundred dollars (8500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last, "
Name Pirst Middle Wast	Month Day Year
Date of Birth Month Day Year 1956	Date of Birth () 19 1956
13 1.00	Place of Birth (State or forcing country)
Place of Birth (State or foreign country)	Residence Address Street or R. R. City County State
Residence Address R. Street or R. R. City County and Sand	RRS, Box 378 32 Snoppe Mend. In
1CHE BOX 3 DE BA STAPA	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Lost Marriage Ended By: Death Divorce Annument
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by:	Driver Leaner apreture
Other (Specify) Wallers Sicense	Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes
1. Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudication been removed? No Yes No Yes
If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease?
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No Yes D
3. Are you related to the female applicant closer than second cousin:	4. Are you now under the influence of intoxicating liquor? No Yes D
4. Are you now under the influence of intoxicating liquor:	5. Are you now under the influence of a narcotic drug? No Ves No Ves
5. Are you now under the influence of a narcotic drug:	6. List (the full names of any dependent children
6. List the full names of any dependent children.	Shaip Lynn Firling
	Musting Event Finding
	Musun were summer
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children?	dependent children? No less to see the dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support.	8 Full name of father Jongie Lee Rumphress
8. Full name of father	0 00 000
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Use Consum	Birthplace of father (State or foreign country)
9. Full maiden name of mother Works Winning	9. Full maiden name of mother Tache Pine Joyce Stevens
Residence of mother (if deceased so state) Plauniul II and.	Residence of mother (if deceased so state) Danulle and
	() (20.00)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given
State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
St 1 mas	1 1 1 1 6
Signed Signed C. 1990	Signed Signed Filling
New Address.	New Address Same
Subscribed and sworn to before me this day of 1981.	Subscribed and sworn to before me this day of June 19.
Maret Jane Bussolark HENDRICKS Circuit Court	Mary Jane Russell Gerk HENDRICKS Circuit Court
Orcut 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 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	
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,	Share A.V. N
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed	
ratner	SignedFather
Signed Mother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of19
Clerk	Cleri
COMPLETE IN MADRIAGE	
HENDRICKS HENDRICKS	RT. A marriage license having been refused to the above named parties, the
County	ourt by written and filet
authorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MAPPIACE LICENSE	
aay of	108 and wife
Be it further remembered the following	and JANET L. FIRKINS
Be it further remembered, the following marriage certificate was filed in my I, JOHN C. MOWRER	office, to-wit:
one thousand nine hundred and 81	hereby certify that on the 26 day of JUNE
State of Indiana Green PDUADD C	hereby certify that on the 26 day of JUNE at INDIANAPOLIS HENDRICKS (County of HENDRICKS
and Bride JANET L. FIRKING	of HENDRICKS County of INDIANA HENDRICKS County, State of INDIANA
were by me united in marria	HENDRICKS County, State of INDIANA County, State of INDIANA
County. County.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 26 day of JUNE , 19	81
, 19	
	Signed JOHN C. MOWRER
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation JUDGE
,	day of JUNE ,19.81.

Signed Mary Jane Russell

.... Circuit Court

HENDRICKS

103

HENDRICKS

Clerk

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSI

893

Effective and HENDRIC	CKS File
MALE Report Poted (-1/-8/	County June 16, 1981
Medical Examination Report Dated 6-16-81	FEMALE Date of Application
Name of Physician D. Hoggord	Medical Examination Report Dated 6-16-81
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT First Middle	Name of Physician 1). Haggord
shall be fined in any sum not exceeding the hundred dollars (\$500,00)".	sever procures the issuance of a license to marry by any false status.
Name	Diparate Statement, representation or pretense
Date of Birth Month Day Year	Name First Name
Place of Birth (State or threign country)	Date of Birth Month Jone Reno
Cffingham, All	Place of Birth (State or fopeign country) Day Year 1944
Residence Address / Syfeet or R. R. City County State	Residence Address Macory (X)
Previous Marital Status: Never Married OR	P.O. Box /// State City County / State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annual D
Other (Specify) Drivers Les W/Ric	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Drivers Lie W/Pier
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes" has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	if answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes D	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No E Yes	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No Yes No Yes List the full names of any dependent children.	5. Are you now under the influence of
Tran Mark 9	6. List the full names of any dependent children.
DI Cla 4 7	Jorera Ring 9
Kelvaca Luve (Mick Rive 7
	0
7. Are you required by any court order or orders to support the above dependent children? No P Yes P	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	No Ves
compliance with any court order or orders issued for their support. 8. Full name of father.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
20 4 100	8. Full name of father William E. Leedy
Residence of father (if deceased so state) Mewlon, All.	Residence of father (if deceased so state) Andiovophilis, Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Cathing Rose Codesell	9. Full maiden name of mother Dorthea drone Belsey
Residence of mother (if deceased so state) Newton All	Residence of mother (if deceased so state) Andiana Solis And
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Andlong
State of Indiana. County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana,
County of	County of new and correct.
Signed Donald & Cloud	Signed Mary Jone Ming
New Address BOX 1/1 Amo INd.	New Address Bay III CAmo, al 4
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me this
Clerk HENDRICKS Circuit Court	Glerk HENDRICKS Circuit Court
CONSENT OF PARENTS	THE PARTY OF CHAPTER
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 parent
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. It 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	signs, state facts which render the consent of the other parent differences
State of Indiana. County of HENDRICKS } **:	State of Indiana, HENDRICKS ss:
of the total of th	County of
Signed Father	Signed Mother
Signed Mother	Signed day of , 19
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
TENDRICKS	rt hy written older issuedamen
authorizes and directs the issuance of	a marriage necesses
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered there was filed in my office a marriage ucense	e issued by the joining together as husband and wife
nationa dated the day of	Mary Jane Ring
Be it further remembered the following marriage certificate was filed in my offi	ice, to-wit:
he	ice, to-wit: areby certify that on the day of June creby certify that on the County of Hand,
the thousand nine hundred and	County, State of
State of Indiana, Groom Donald E. Clark of Indiana, Groom Donald E. Clark of Indiana, Groom Donald E. Clark of Indiana, Groom of Indiana, Groom Donald E. Clark of Indiana, Groom Indiana, Groom Donald E. Clark of Indiana, Groom Donald E. Clark o	at murnose by the Clerk of the Circuit Court of HENDRICKS
County, me united in marriage as authorized by a marriage license issued for	a la Partor
Dated this day of Time, 1981	Signed Albert Douglas Parker
	Tial Designation Minister

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

Form Prescribed By Indiana State Board of

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

active July 1 1977				
ective July 1, 1977		FEMALE	18-01-01	
MALE 10-8		FEMALE Medical Examination Report	Dated	
MALE Medical Examination Report Dated		Medical Examination Report Name of Physician	10	
Name of Physician J. I. Wichols	Whoeve	or procures the issuance of a license to mar	ry by any false statement, rep	resentation or pretense
Name of Physician 7 - T . Wickels L QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False libe fined in any sum not exceeding five hundred dollars (\$500,00)".	statement - William	FEMAI	LE APPLICANT	
MALE APPLICANT		Name First	Middle	Jaker Last
me First Michael Middle	Last	Date of Birth Month	Day 22	Year 5 2
te of Birth Day Year		Place of Birth (State or foreign country)		
ace of Birth (State or foreign country)		IND PO	R. City C	ounty State
sidence Address Street of R. R. City County	State To Sal	It Round Hill Ct.	Davrille tr	46/2
609 Broken Bow Trail + rapis.		Previous Marital Status: Never Married	OR	
evious Marital Status: Never Married OR		E-ded By Death Divorce	Aminanie	
ast Marriage Ended By: Death Divorce Annulment Annulment ate of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by Birth Certifica	L Sudicial Line	ici
		d Other (Specify) Drive	is hic. with	× -
Other (Specify) Drivers his upper hind?	No Ves	1 Are you now or have you ever been adjudg	red to be of unsound mind?	No Yes O
Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No □ Yes □	If answer is "yes", has the adjudication been	en removed	No Yes C
Are you afflicted with a transmissible disease?	No Yes O	Are you afflicted with a transmissible dise Are you related to the male applicant close	er than second cousin?	No O Yes C
Are you related to the female applicant closer than second cousin?	No A Yes	Are you now under the influence of intoxic	cating liquor	No No Yes
Are you now under the influence of intoxicating liquor?	No Yes D	5. Are you now under the influence of a narc	otic drug*	No No Yes
Are you now under the influence of a narcotic drug? List the full names of any dependent children.		6. List the full names of any dependent child	Iren.	
Brian Ford		Dove		
Are you required by any court order or orders to support the above	No □ Yes □	 Are you required by any court order or of dependent children? 		No□ Yes□
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory pr		If answer is "yes", it is required that this A		
compliance with any court order or orders issued for their support.		compliance with any court order or order	s issued for their support	
Full name of father Louis T. Ford		8. Full name of father	Danville I	· her
Residence of father (if deceased so state)		Residence of father (if deceased so state)	T	
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign count	· // /	0
Full maiden name of mother Francis Garringer		9. Full maiden name of moune.		
Residence of mother (if deceased so state) Florida		Residence of mother (if deceased so state)	Same	
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign cour		
State of Indiana, HENDRICKS Section Section Section HENDRICKS Section Se	formation given	State of Indiana. County of HENDRICKS	ss: I depose and st in this applica	ate the information give tion is true and correc
County of			allow O sugar	
Signed & Michael & Ford	1 662	Signed X	Broken Bowde	#315 hupes
New Address 809 Broken Boro TAV	81	New Address SMA Subscribed and sworn to before me this	And the state of t	June 198
Subscribed and sworn to before me this day of HENDRICKS	, 19	Subscribed and sworn to before me this	sell Gerk HEND	ORICKS Circuit Co
Many Jame Russell Clerk HENDRICKS	Circuit Court	Mary Jone Kers	Clerk	Official
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 parent	We, the parents, of this applicant her	eby give consent for this ma	rriage. If only one par-
signs, state facts which render the consent of the other parent unnecessary.	Personal Property Control Control	signs, state facts which render the co	nsent of the other parent un	necessary
		,	>*************************************	***************************************
			Approximate the second	***************************************
			***************************************	**************************
State of Indiana,		State of Indiana,	1	
County of HENDRICKS ss:		County of HENDRICKS	} 88;	
				E7-14
Signed	Father	Signed	***************************************	F &
Signed				Ma
	Mother			Mol
Signed		Signed.		Mo
Signed		Signed. Subscribed and sworn to before me th	is day of	
Signed	Mother	Signed	day of da	named parties,
Signed		Signed	day of da	ye named parties,
Signed		Signed	een refused to the above	named parties,
Subscribed and sworn to before me this day of HENDRICKS County in authorizes and dire RETURN OF MAR Be It Remembered, there was filed in my office	DER OF COUL	Signed	named parties. ATE HENDRICKS	ve named parties, and f
Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY OR: HENDRICKS County in authorizes and dire RETURN OF MAR Be It Remembered, there was filed in my office of Indiana dated the day of	DER OF COUL	Signed	named parties. HENDRICKS	re named parties, and f
Signed	DER OF COURTER STATE LICENS	Signed	named parties. ATE HENDRICKS ng the joining together	re named parties, and to Circuit C as husband and
Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY OR HENDRICKS in authorizes and dire RETURN OF MAR Be It Remembered, there was filed in my office of Indiana dated the day of MICHAEL L. FORD Be it further remembered, the following marriage certificate	DER OF COULTERS TO THE COURT OF COURT O	Signed Subscribed and sworn to before me the subscribed and subscribe	named parties. ATE HENDRICKS ng the joining together	re named parties, and f
Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY OR HENDRICKS in authorizes and dire RETURN OF MAR Be It Remembered, there was filed in my office of Indiana dated the day of MICHAEL L. FORD Be it further remembered, the following marriage certificate	DER OF COULTERS TO THE COURT OF COURT O	Signed Subscribed and sworn to before me the subscribed and subscribe	named parties. ATE HENDRICKS ng the joining together	re named parties, and f
Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY OR HENDRICKS County in authorizes and dire RETURN OF MAR Be It Remembered, there was filed in my office of Indiana dated the day of MICHAEL L. FORD Be it further remembered, the following marriage certificate I, County one thousand nine hundred and MICHAEL L. FORD	DER OF COULTERS THE PROPERTY OF COURTS THE ISSUANCE OF COURTS THE ISSUANCE OF	Signed	named parties. ATE HENDRICKS ng the joining together LKER 4th day of JU County of	ce named parties, and f Circuit Co as husband and a
Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY OR HENDRICKS in authorizes and dire RETURN OF MAR Be It Remembered, there was filed in my office of Indiana dated the day of MICHAEL L. FORD Be it further remembered, the following marriage certificate I, one thousand nine hundred and State of Indiana, Groom MICHAEL L. FORD and, Bride CHERYL D. WALKER	DER OF COULD cets the issuance RIAGE LICENS a marriage lice was filed in my	Signed	named parties. ATE HENDRICKS ng the joining together LKER 4th day of JU County of County, State of	ce named parties, and for as husband and to the themposition and to the themposition are the themposition as indiana.
Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY OR HENDRICKS in authorizes and dire RETURN OF MAR Be It Remembered, there was filed in my office of Indiana dated the day of MICHAEL L. FORD Be it further remembered, the following marriage certificate I, Company of the company of t	DER OF COULT cots the issuance RIAGE LICENS a marriage lice was filed in my was filed in for	Signed	named parties. ATE HENDRICKS ng the joining together LKER 4th day of JU County of County, State of	Circuit Constant and

Official DesignationMINISTER

day of JULY Signed MARY JANE RUSSELL

Circuit Court

HENDRICKS

6th

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

B-Marriage

Form Prescribed By Indiana State Board of Health under Authority of IC 31 1 3 2 Effective July 1 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	295	
File_		
	6-17-81	11.2

HENDRICK	County / 170/
MALE Parent Parent Parent	Data of Andrew
Medical Examination Report Dated (0-15-8)	FEMALE
Name of Physician Walter memanis	Medical Examination Report Dated 6-15-81
ALL OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "Falso state	Name of Physician Walter Mc Mannix
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement
MALE APPLICANT First Middle	
Name Curtis R. Gelhuat	Name First
Date of Birth Month Day Year	Date of Birth Month Evans
Place of Birth (State or foreign country) - A 1 0	Day Year
Residence Address Street or R. R. J. Sity, County, State	Place of Birth (State or foreign country)
509 Sepamono St. Pelol. He nd Ind	Residence Address Street of R. R. City County State
Previous Marital Status. Never Married OR	The Scenning Inolphs Marion and
Last Marriage Ended By Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Other (Specify) Drivers Secence Upicture	Date of birth verified by:
//	Other (Specify) Drivers Lecense Upicture
I. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes" has the adjudication been removed? No D Yes D	1. Are you now or have you ever been adjudged to be of unsound mind?
and the state of t	If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissione disease. No Ves 3. Are you related to the female applicant closer than second cousin? No Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves	2. Are you afflicted with a transmissible disease?
4 Are you now under the influence of intoxicating liquor? No 2 X65 C	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes C	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
As you arrowed by any court order or order to proper the court of the	
7. Are you required by any court order or orders to support the above dependent children? No Yes C	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes" it is required that this Application he accompanied by esticicatory proof that two are in
compliance with any cyclet order or orders issued for their support.	compliance with any couft order or orders issued for their support. 8. Full name of father Friderick Welliam Brandt.
8. Full name of father Curtis Robert Gelbrech, DR.	8. Full name of father Frederick Welliam Brandt.
Residence of father (if decreased so state) Wellased	Residence of father (if deceased so state) Herosecl
Birthplace of father (State or foreign country) Clay & Ind.	Birthplace of father (State or foreign country) Incliance
9 Full marden name of mother Edna That Neady	9. Full maiden name of mother Ida Mae Bartley
Decement	9. Full maiden name of mother Occasional
Residence of mother (if decreased so state)	Residence of mother (if deceased so state)
Birthplace of mother i State or foreign country L. Clay Co. Snd.	Birthplace of mother (State or foreign country) Turnam Co. Snot.
State of Indiana. State of Indiana. HENDRICKS State of Indiana. I depose and state the information given in this application is true and correct.	State of Indiana. HENDRICKS Ss: I depose and state the information given in this application is true and correct.
County of MESTORICAS A. D. M. D. I	Simul Vennie M. Evans
Signed Kuras K Nicoresh	Signed Signed Towns
New Address 44 So Flenning	New Address.
Subscribed and swoon to before me this / T day of June 1981.	Subscribed and sworn to before me this day of 1901.
Mary and Russell gork HENDRICKS Circuit Court	Mary and Russell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
hate facts which render the consent of the other parent unittended	
State of Indiana.	State of Indiana, HENDRICKS ss:
County of HENDRICKS	County of
Signed	Signed
Mother	Signed Mother
Signed	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me this day of	Subscribed and Clerk
Clerk	the share named parties, the
COMPLETE IN A COURT OF COLIE	T. A marriage license having been refused to the above named parties, the
In a lineate the ignitude	JI a married
cente	E AND MARRIAGE
Be It Remembered, there was filed in my office a marriage licer	nse issued by the clerk of the
Be It Remembered, theye was filed in my office a marriage	, 191 authorizing the joining together as have
Indiana dated the Ad day of	Jennie III Com
Be it further remembered, the following marriage certificate was filed in my	office, to-wit.
1, Paul R. Collins	hereby certify that on the County of Macion,
one thousand	at County, State of
State of Indiana C A stie C TI Dre Ch	County, State of County
and, Bride Johne W. Eans of were by me united in marriage as authorized by a marriage license issued for County.	The Clerk of the Circuit Court of
were by me united in marriage license issued for	that purpose by the state of th
County.	Paul R. Collins
County. Dated this day of July 19	Signed Win 1ster
	Official Designation July , 1981 Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	HENDRICKS Circuit Court
recorded in accordance with the laws of the State of	Signed Circuit Court

APPLICATION FOR MARRIAGE LICENSE

File_ 6-17-81 Date of Application

... Circuit Court

ana State Board of APPLICATION Ith under Authority C. 31-1-3-2	FOR MARRIAGE LICENSE County Date of Application
pective July 1, 1977	FEMALE Medical Examination Report Dated 6-12-81
MALE Deted	
Medical Examination Report Dated	Name of Physician American false statement, representation as
Name of Physician Transcribed "False state	ement - Whoever procures the issuance of a license to marry by any false statement, representation or pret FEMALE APPLICANT
L QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 pt. (8500.00)". all be fined in any sum not exceeding five hundred dollars (8500.00)".	
MALE APPLICANT	st Name First Middle Mc Camm
me First Middle	Date of Birth Month Day
te of Birth Month Day Year	Place of Birth (State or foreign country)
ace of Birth (State or foreign country)	Residence Address Of Street or R. R. City County State
Street or R. R. City County S	State 229 have there, pourshing, there,
grante & Phys Brands of	Previous Marital Status: Never Married OR
evious Marital Status: Never Married OR	Finded By Death Divorce Annument
st Marriage Ended By: Death Divorce Annulment Late of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
te of birth verified by:	Other (Specify) Driver's lecense W/ proton
Q Other (Specify) Downs for upport	1. Are you now or have you ever been adjudged to be of unsound mind.
Are you now or have you ever been adjudged to be of unsound mind.	0 ☐ Yes ☐ If answer is "yes", has the adjudication been removed.
and the second state of the second se	No Yes 2. Are you afflicted with a transmissible disease? No No No No No No No No
than second could be a long than second could be	3. Are you related to the male applicant closer than second cousin No. No. 2. Are you now under the influence of intoxicating liquor No. 2. No
N influence of intoxicating liquor?	No.00
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug: 6. List the full names of any dependent children.
List the full names of any dependent children.	
Shaus	
	7. Are you required by any court order or orders to support the above
Are you required by any court order or orders to support the above dependent children?	In Yes dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof the	nat you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you
compliance with any court order or orders issued for their support.	compliance with any court order or orders assess to
Full name of father Handin and	8. Full name of father Wittle G. Glased
Residence of father (if deceased so state) Symposium & Jud.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother Cathanine Rand	9 Full maiden name of mother.
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) Clouded Ole, Will.
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Tennessee
State of Indiana, HENDRICKS I depose and state the inform in this application is true a	TEIN IKIL K.
County of HENDRICKS	County of PIO MC/
Signed X Marles F Samo	Signed Cutte III Cambri
New Address 299 FRAIRIE PROUN	New Address Same as afrail
Subscribed and sworn to before the things	Subscribed and sworn to before me thin day of
Many Jane Russell Clerk HENDRICKS C	Circuit Court Mary Jone Kussell Clerk HENDRICKS Circu
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
Ve, the parents, of this applicant hereby give consent for this marriage. If only	
igns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana,	State of Indiana,
County of HENDRICKS ss:	County of HENDRICKS
Signed	Father Signed
Signed	
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this	Subscribed and sworn to before me this day of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	Subscribed and sworn to before me this day of Court. A marriage license having been refused to the above named particles.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named part Court by written order issued a
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS authorizes and directs	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued at the issuance of a marriage license to the above named parties.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs to	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued at the issuance of a marriage license to the above named parties.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office a new control of these was filed in my office and the control of the	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued at the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circums.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs RETURN OF MARRIA Be It Remembered, there was filed in my office a month of Indiana dated the day of day of day of the state	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named part Court by written order issued the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the MARRIAGE CERTIFICATE marriage license issued by the clerk of the MARRIAGE CERTIFICATE marriage license issued by the clerk of the MARRIAGE CERTIFICATE marriage license issued by the clerk of the MARRIAGE CERTIFICATE marriage license issued by the clerk of the MARRIAGE CERTIFICATE marriage license issued by the clerk of the MARRIAGE CERTIFICATE marriage license issued by the clerk of the joining together as husband as
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs RETURN OF MARRIA Be It Remembered, there was filed in my office a most of Indiana dated the day of the control of Ind	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued at the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circular country of the country of the pointing together as husband at filled in my office to suit.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs RETURN OF MARRIA Be It Remembered, there was filed in my office a month of the second of Indiana dated the day of the second of Indiana day of the second of Indiana dated the lateral day of the second o	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued at the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circums and authorizing the joining together as husband as filled in my office to write.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County RETURN OF MARRIA Be It Remembered, there was filed in my office a most of Indiana dated the day of the control of the con	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued at the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circums and authorizing the joining together as husband as filled in my office to write.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs RETURN OF MARRIA Be It Remembered, there was filed in my office a m of Indiana dated the day of Be it further remembered, the following marriage certificate was I, Johnson State of Indiana, Groom	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued at the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circumstant And Andrew And
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County In authorizes and directs RETURN OF MARRIA Be It Remembered, there was filed in my office a m of Indiana dated the day of Be it further remembered, the following marriage certificate was I, be a further remembered and State of Indiana, Groom State of Indiana, Groom and, Bride	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circular and 1980, authorizing the joining together as husband a filed in my office, to-wit: hereby certify that on the day of the county of the county of the county, State of the county, State of the county, State of the county of the county of the county of the county, State of the county of the county, State of the county of the coun
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County In authorizes and directs RETURN OF MARRIA Be It Remembered, there was filed in my office a month of the state of Indiana dated the day of Be it further remembered, the following marriage certificate was in the state of Indiana, Groom State of Indiana, Groom State of Indiana, Groom Mere by me united in marriage as authorized by a marriage licen	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued a the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circum, 1951, authorizing the joining together as husband a filled in my office, to-wit: hereby certify that on the day of the county of the county of the county, State of the county, State of the county, State of the county, State of the county of the county of the county of the county of the county, State of the county
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs RETURN OF MARRIA Be It Remembered, there was filed in my office a month of the state of Indiana dated the day of Be it further remembered, the following marriage certificate was light form thousand nine hundred and State of Indiana, Groom State of Indiana, Groom and, Bride were by me united in marriage as authorized by a marriage licen	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Marriage license issued by the clerk of the hendrizing the joining together as husband as filed in my office, to-wit: hereby certify that on the day of hereby certification that the day of hereby certification that the day of hereby certification that the day of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County Me It Remembered, there was filed in my office a month of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in the state of Indiana, Groom State of Indiana, Groom State of Indiana, Groom And	Subscribed and sworn to before me this day of Clerk R OF COURT. A marriage license having been refused to the above named particular court by written order issued a the issuance of a marriage license to the above named parties. AGE LICENSE AND MARRIAGE CERTIFICATE marriage license issued by the clerk of the HENDRICKS Circum, 1951, authorizing the joining together as husband a filled in my office, to-wit: hereby certify that on the day of the county of the county of the county, State of the county, State of the county, State of the county, State of the county of the county of the county of the county of the county, State of the county

Form Prescribed By Indiana State Board of Health under Authority of LC. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATIO

ON FOR MA	RRIAGE LICENSE	No. 297
HENDRICKS		File
	County	6-18-81
	FEMALE Modical P	Date of Application
	Medical Examination Report Dated	6-12-81

MALE	
Medical Examination Report Dated 0-12-81	FEMALE Date of Application
Name of Physician Naggard	Medical Examination Report Dated 6-12-81
ALL QUESTIONS MUST BE ANSWERED, IC 31-1-3-6 press 7	Name of Physician D Manual
ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	pever procures the issuance of a liganus to
MALE APPLICANT	a needse to marry by any false statement, representation or pretense
Name Phi First A Middle Last	Name FEMALE APPLICANT
Date of Birth Month Day	Middle / Last
Place of Birth (State or foreign country)	Date of Birth Month Pay
though Ind.	Place of Birth (State or foreign country) Year 1942
Residence Address Street or R. R. PlyCity County, State,	Residence Address / Radibon In. J.
Previous Marital Status: Never Married OR	409 Nanley POLSity Sounty State
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify)
If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed? No Yes
3. Are you related to the female applicant closer than second cousin?	2. Are you related to the work. No Yes D
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor? No Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of
6. List the full names of any dependent children.	6. List the full names of any dependent children.
-V. Dennikler resembling	
	The second secon
7. Are you required by any court order or orders to support the above	The second secon
dependent children?	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Pull A. Davis, St.	8. Full name of father Courrence U. Fronkle
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Indeana	9,
9. Full maiden name of mother Breta J. Stennett	Birthplace of father (State or foreign country)
DOM A	9. Full maiden name of mother Judion Chin Street
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) # If all the .
Birthplace of mother (State or foreign country) Centucky	6. // /
	Birthplace of mother (State or foreign country) Solicana
State of Indiana,	State of Indiana, I depose and state the information given
State of Indiana	State of Indiana
State of Indiana,	State of Indiana, HENDRICKS Section 1 Section 2 Sectin 2 Section 2 Section 2 Section 2 Section 2 Section 2
State of Indiana. County of HENDRICKS Signed Signed State the information given in this application is true and correct.	State of Indiana, County of HENDRICKS Signed X Cotty L Kenkle
State of Indiana, County of HENDRICKS Signed Market Marke	State of Indiana, County of HENDRICKS Signed X Cothy L Kerkle New Address // 080 W Washington &b. Lob
State of Indiana, County of HENDRICKS Signed New Address / O 80 Washington of hot 6 Subscribed and sworn to before pre-this day of 19.81	State of Indiana, County of HENDRICKS Signed X Cothy L Kerkle New Address // 0.80 W Washington & . 1966 Subscribed and sworn to before me this day of HENDRICKS
State of Indiana. County of HENDRICKS Signed New Address / 080 W. Washington St hot 6	State of Indiana, County of HENDRICKS Signed X Cothy L Kenkle New Address // 080 W Washington & Lob
State of Indiana. County of HENDRICKS Signed New Address / O80 W Washington St hot 6 Subscribed and sworn to before me this day of HENDRICKS Circuit Court Clerk HENDRICKS Circuit Court	State of Indiana, County of HENDRICKS Signed X Cothy Linkle New Address // 080 W was hington \$6. Subscribed and sworn to before me this day of linkle hendricks Many Jan Lussiank HENDRICKS Circuit Court
Subscribed and sworn to before me this day of HENDRICKS Subscribed and sworn to before me this day of HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN	State of Indiana, County of HENDRICKS Signed X Cotthy Lenkle New Address // 080 W washington \$6. Subscribed and sworn to before me this day of HENDRICKS Consent of Parents, Parent or Guardian
State of Indiana. County of HENDRICKS Signed New Address / O80 W Washington St hot 6 Subscribed and sworn to before me this day of HENDRICKS Clerk HENDRICKS Circuit Court	State of Indiana, County of HENDRICKS Signed X Cothy New Address // 080 W Washington & County of HENDRICKS Subscribed and sworn to before me this day of 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. County of HENDRICKS Signed New Address New Address Clerk Consent of Parents, Parent or Guardian I depose and state the information given in this application is true and correct. Signed New Address Clerk Clerk Clerk Circuit Court Consent of Parents, Parent or Guardian	State of Indiana, HENDRICKS 88: I depose and state the information given in this application is true and correct. Signed X Cathy L Lenkle New Address //080 W Washington Sb. Lob Subscribed and sworn to before me this day of Library Court CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of HENDRICKS Subscribed and sworn to before me this day of 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, County of HENDRICKS Signed X Cothy Linkle New Address // 080 W Washington St. Subscribed and sworn to before me this day of LINL CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
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APPLICATION FOR MARRIAGE LICENSE

.... Circuit Court

HENDRIC	MARRIAGE LICENSE KS County File Date of Application
fective July 1, 1977	FEMALE (6-12-81
MALE Malicel Framination Report Dated 6-12-81	Medical Examination Report Dated (12-8)
Medical Examination Report	Name of Physician Carl Mexica
Name of Physician Corl Kewlern	the issuance of a license to marry by any false statement, representation or preten-
LI OUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who	never procures the issuance of a license to marry by any false statement, representation or pretens
all be fined in any sum not exceeding the	Middle
MALE APPLICANT Middle Mast Mast	Name Circh Charles Cha
Serry G.	Date of Birth Month Day Year
te of Birth Month Day 1956	Place of Birth (State or foreign country)
ace of Birth (State or foreign country)	and place in a
sidence Address Street or R. R. County	Residence Address Street or R. R. Street or R. R.
928 Walton W. Harris Sha	Previous Marital Status: Never Married OR
evious Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
st Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
te of birth verified by: Birth Certificate Judicial Decree	
Other (Specify) Drivers Sicense & picture	Other (Specify) Drivers Sicinse W/ secture
Other (Specify) No U Yes Are you now or have you ever been adjudged to be of unsound mind?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
Are you now or have you ever been adjudged to be of dissession and the second of the s	If answer is "yes", has the adjudication been removed?
Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No yet
Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yes
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Wyes
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
List the full names of any dependent children.	6. List the full names of any dependent children.
Jerry Joseph Smith	Wayne Thomas archer
0 /	
	7. Are you required by any court order or orders to support the above
Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court orders issued for their support.	compliance with any rough order or orders issued for their support
Full name of father Grant Smith	8. Full name of father John Russell Blan
Residence of father (if deceased so state Deceased and a state Deceased so state Dec	Residence of father (if deceased so state)
Roatinki	22 dolo alad
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother the doc trello	9. Full maiden name of mother 1999 2000
Residence of mother (if deceased so state Steen able and	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country Kentucky	Birthplace of mother (State or foreign country)
tate of Indiana, I denose and state the information given	State of Indiana, I depose and state the information gi
County of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS sa: in this application is true and corr
The state of the	11. 1.
Signed A Control	Signed X Called Walder
New Address X & Waxton Mr.	New Address 928 Walter fly
Subscribed and sworn to before me this day of day of 19	Subscribed and sworp to before me this day of day of
ary pro Busself Clerk HENDRICKS Circuit Court	That and Dusselferk HENDRICKS Circuit
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one parents
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 of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed Father	
	Oigited
Signed	
Subscribed and sworn to before me thisday of, 19	. Subscribed and sworn to before me this day of
Class	k
COMPLETE III MADDA G	K
HENDRICKS LICENSE ISSUED BY ORDER OF CO	OURT. A marriage license having been refused to the above named parties
County County	Court by written order issuedand
authorizes and directs the issuance	ce of a marriage license to the above and a sting
Be It Remembered, there was filed in my office a marriage lift Indiana dated the day of	NSE AND MARRIAGE CERTIFICATE
of Indiana dated the AMA day of him	icense issued by the clerk of the HENDRICKS Circuit
Be it further remembered the fill	and the control of the joining together as husband and
January Commenced and the following market and the	
State of Indiana C	at los Hill & A ct day of me
state of Indiana, Groom less the in ith	County of 11 Q
one, Briae All Tilles	at location the day of June at location of Hend County of County of County of County of Marion
Townty	County, State of
Dated this day of June, 19	HENDRICKS HENDRICKS
any of, 19	6 (
	Signed Lean Smith
'iled and recorded in accordance with the laws of the State of the	Official Designation 30 day of Tune ,1981
of the State of Indiana this	50 day of June 1081
	Signed Janes Kissell
	Signed Mary Jarolussell HENDRICKS Circuit

Circuit Court

HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENS

Effective July 1, 1977 HENDRICI	KS File H2
MALE	County <u>6-18-81</u>
Medical Examination Report Dated 6-18-81	FEMALE Date of Application
Name of Physician Stegmaller	Medical Examination Report Dated 6-18-81
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Steamolon
MALE APPLICANT	never procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle Last	FEMALE APPLICATION
Date of Birth Month Day Year	First Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)
510 Calible Stone Peld County State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	Day 1680 Bandridge
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment O
	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Durers fine uping,	A Other (Specify) Driver Lie Word
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease? No Yes Yes No Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Q Yes D	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin? No ☐ Yes ☐ 4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
Floridaeth O'Breen	6. List the full names of any dependent children.
Enine O'Bries	James W. Miller III
	Drigela C. Miller
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Annual P. O'Bush	compliance with any court order or orders issued for their support. 8. Full name of father Laboratory Laboratory Compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) Indeple.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother & satisface & Kollar	9. Full maiden name of mother Mary M. (Malettee or Pintop)
Residence of mother (if deceased so state)	
Birthplace of mother (State or foreign country)	Residence of mother (if deceased so state)
State of Indiana,	State of Indiana, ITALICAL State of Indiana, ITALICAL State of Indiana, ITALICAL State of Indiana, ITALICAL STATE OF ITA
County of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS 88: I depose and state the information given in this application is true and correct.
Signed X / Dries	Signed Alberry Meller
New Address 510 Colflette 121 Tife	New Address 5/0 Cabbleston Sef
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this. day of 1901.
Mary lane Russell Clerk HENDRICKS Circuit Court	Many Jane Russall Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
and the consent of the color part and the color par	
State of Indiana,	State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
Clerk	Clerk
	T A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR.	r. A marriage needs and filed and filed and filed
in County and directs the issuance of	f a marriage license to the above named parties.
TOTAL CONTRACTOR OF THE CONTRA	AND MARKET COUNT
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license of Indiana dated the day of arrival arri	. CATHERINE L. MILLER
Be it further remarks J. O'BRIEN artificate was filed in my of	fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of the standard of the following marriage certificate was filed in my of the standard of the stan	ereby certify that on the County of HENDRICKS
one thousand nine hundred and 81	HENDRICKS County, State of TENNEX INDIANA
State of Indiana, Groom THOMAS J. O'BRIEN	ENDRICKS County, State of HENDRICKS
In the strain of the following marriage certificate was fixed it in the strain of the	hat purpose by the Clerk of the Circuit Court of
County.	L JOHNSON
Dated this day of JUNE 19, 19	SignedMINISTER
	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this	XXX 29 day of JUNE NARY JANE RUSSELL Clerk HENDRICKS Circuit Court

Signed.

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

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APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By	ION FOR M	ARRIAGE LIC	CENSE	File	
Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County		Dat	e of Application
		FEMALE Medical Exami	ination Report D	ated 6-	10-81
MALE Medical Examination Report Dated	ml.	Name of Physi	ician And	at al. 8	Verni Ma
Name of Physician ANSWERED, LC, 31-1-3-6 prescribed "Falsalling flow hundred dollars (\$500,000)".	se statement - Whoev	er procures the issuance of	of a license to marra	to any faise statemen	at, representation or preter
shall be fined in any sum not exceeding five hundred dollars (\$500,000". MALE APPLICANT			FEMALE	APPLICANT	
Name / First Middle	Last	Name But	will	ann.	Portugue Last
Date of Birth Month Day Yea	ar O	Date of Birth	Month	Day	Year 19 49
Place of Birth (State or foreign country)	9	Place of Birth (State of	foreign country)	ex Can	ty In
Residence Address Street or R. R. City County	State	Residence Address	Surper or R. R.	Pl city	County State
Previous Marital Status: Never Married DOR			Never Married O OH		
Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By-	Death Divorce D	Annulment O	
Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by	, partir tersings	1.	11,71
Other (Specify) Armus Manie Section		Other (Specify)	The same of the sa	Mildel	genun)
1. Are you now or have you ever been adjudged to be of unsound mind?	No P Yes D	1 Are you now or have you			No D Yes
If answer is "yes", has the adjudication been removed?	No D Yes D	2 Are you afflicted with a			No Yes
Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin?	No Yes D	3 Are you related to the			No Ves
4. Are you now under the influence of intoxicating liquor?	NaD Yes D	4 Are you now under the			No D Yes
5. Are you now under the influence of a narcotic drug?	No Yes	5 Are you now under the 6 List the full names of a			No S Yes
6. List the full names of any dependent children.		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
7. Are you required by any court order or orders to support the above dependent children?	No□ Yes□	7 Are you required by an dependent children"	y court order or orders	to support the above	No□ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory pr	roof that you are in	If answer is "yes", it is r	required that this Appli	cation be accompanied by	y satisfactory proof that you are
compliance with any court order or orders issued for their support.			ourt order or orders issu	and for their support	Pethous
8. Full name of father Market Market	TROPA	8 Full name of father	CHAMES.	Marile	- Jonney
Residence of father (if deceased so state)		Residence of father (if de	rceased so state;	Canerya,	1
Birthplace of father (State or foreign country)		Birthplace of father (Sta	de or foreign country L	- really	of Pin
9. Full maiden name of mother fry fra Mark	2	9 Full maiden name of mo	ther Alle	The state of the s	a sund
Residence of mother (if deceased so state)		Residence of mother (if d	secessed so states	and of	7
Birthplace of mother (State or foreign country) State of Indiana, If he process and state the inf	formation given	Birthplace of mother (St State of Indiana,	ate or foreign country i	Triple	and the information of
County of HENDRICKS 88: in this application is tru	ue and correct.	1 480 400	DRICKS		I state the information giv lication is true and corre
Signed uffrey Ward tobe	noen		Signed Salel	rly ann	tothwell
New Address 877 Wast Center C	Janielle	New /	Address 877	West Clin	Ton Canvill
Subscribed and sworn to before methis day of day	. 198/	Subscribed and sworn to	before me this	8 day of	felal 190
1) Hour March Mendricks	Circuit Court	171/21/ JA	u tusses	Cerk HE	NDRICKS Circuit Cou
CONSENT OF PARENTS, PARENT OR GUARDIAN		10			
We, the parents, of this applicant hereby give consent for this marriage. If o	only one parent	CONSENT OF PAREN			
signs, state facts which render the consent of the other parent unnecessary	-	We, the parents, of this			
		signs, state facts which	render the consent	of the other parent	unnecessary
					ALLEGO, WILLIAM PORTOR OF THE PARTY OF THE P
					NAME OF THE OWNER
State of Indiana,		Santa of Yank			
County of HENDRICKS ss:		State of Indiana, County of HEN	DRICKS	na:	
Signed	Father	Signe	ed.		Fath
Signed	Mother	Signe			Moth
Subscribed and sworn to before me this day of		Subscribed and sworn to		day of	19
	Clerk		berose me unib	day or	Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDI	ER OF COURT				- 41
HENDRICKS County in authorizes and direct	Cour	A marriage license	having been re	fused to the abo	ove named parties, tr
and difecti	s the issuance of	a marriage license to	the above name	d parties	and m
Be It Remembered there are the MARKI	AGE LICENSE	AND MARRIAGE	CEDTIFICATO		
of Indiana dated the	The se ticense	issued by the clerk	of the	HENDRICKS	Circuit Cou
of Indiana dated the	Joine	, 107	, authorizing th	e joining togethe	r as husband and wi
I. GERY I SERVICE	is filed in my offi	ce, to-wit	HA ROTHWE		PROPERTY OF THE PROPERTY OF PERSONS ASSESSED.
I, GERY L. SERVIES one thousand nine hundred and 81 State of Indiana Company JEFFERY W. PORINSON	he	reby certify that on t	the 11	day of JU	ly
one thousand nine hundred and 81 State of Indiana, Groom JEFFERY W. ROBINSON and, Bride BEVERLY A. ROTHVELL were by me united in marriage as authorized by a marriage lice County.	of	HENDRICKS		County, State of	IN
and, BrideBEVERLY A. ROTHVELL were by me united in marriage as authorized by a marriage lice County	nse issued for th	at purpose by 11		County, State of	HENDRICKS
County. Dated this JULY	. 81	the Cle	rk of the Circuit	Court of	TILINDAICKS
		Signed	GERY L. SER	RVIES	and a second
Filed and recorded in accordance with the laws of the State of the	O _I	ficial Designation	MINISTER	M. I. M.W.	
Filed and recorded in accordance with the laws of the State of 1	naiana this	14 day o	f JULY	*******************	, 19.81

Signed MARY JANE RUSSELL
HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of
Indiana Authority
Health under Authority
of IC 31 1 3:2 Effective July 1 1977

APPLICATION FOR MARRIAGE LICENSE

No	301	
		W. Lindson

HENDRIC	County
MALE Medical Examination Report Dated 6-18-8/	FEMALE Date of Application
Name of Physician Eric Clark	FEMALE Medical Examination Report Dated 6-18-81
Name	Name of Physics
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement-Who	ever procures the
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	If the issuance of a license to marry by any false statement, representation or pretense
Name First Middle Plast	FEMALE ADDITIONS
Date of Birth Month Day Year	Middle /
Place of Birth (State 99 foreign country)	Date of Birth Mynth Day
Hend young me	Place of Birth (State or foreign country)
Residence Address Street of R. By Canvelle Lounty State	Residence Address States Incl.
Previous Marital Status. Never Married OR	PO Box 169 Coateswill And Incl
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
other specify drivers because y picture	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Drivers License Mpicture
If answer is "yes" has the adjudication been removed? No Yes No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
2 Are you afflicted with a transmissible disease? No Vaco	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin. No was a	2. Are you afflicted with a transmissible disease? No 2 Yes 1
4 Are you now under the influence of intexicating liquor? No D yes D	3. Are you related to the male applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor? No Yes No Yes
5. Are you now under the influence of a narcotic drug? No Yes O	5. Are you now under the 1.0
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	Micole Lee Morrissees
Are you required by any court order or orders to support the above dependent children."	7. Are you required by any court order or orders to support the above
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court perfer or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Warren & Dugan	8. Full name of father Coultage C. Crosbu
Residence of father (if deceased systate) Vancastes, MO.	Au M
Birthplace of father State of Corning Country Indiana	Sul V.K
Full maiden name of mother Cernico Warner	Birthplace of father (State or foreign country)
La saut CAN	9. Full maiden name of mother that fell walley
Residence of mother tif decreased so state). Tancasta, MO.	Residence of mother (if deceased so state) DO Carolina
Birthplace of mother (State or foreign country).	Birthplace of mother (State or foreign country) Incleases
State of Indiana. County of HENDRICKS an: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Sax: I depose and state the information given in this application is true and correct.
X all Al Al	Country of Macrin new
Signed X Norty W-Neg	Signed X W WY / Massacr
New Address	New Address.
Subscribed and sworn to before me this day of full 190/.	Subscribed and sworn to before me this 17 day of 19.01
Tharif fail Cusvell Clerk HENDRICKS Circuit Court	Mary Jane Kussell Clerk HENDRICKS Circuit Court
	The state of the s
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
tate of Indiana.	State of Indiana, HENDRICKS } ss:
ounty of HENDRICKS }	County of
Signed Father	SignedFather
STATE OF THE PROPERTY OF THE P	Signed
Signed	Subscribed and sworn to before me thisday of, 19
ubscribed and sworn to before me this day of	Clerk
Clerk	1 1 to the above named parties the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the art by written order issued 3-day waves and filed
HENDRICKS County Superior County Coun	art by written order issued 3-day waves and filed
	a marriage license to the above hamed parties
THE PRINCE LICENSE	AND MARKIAGE CERTIFICATION HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens	the joining together as husband and wife
Indiana dated the day of day	1 with 10 1 L. III Sprissey
eithead Dugan	fice, to-wit:
urther remembered, the following marriage certificate was filed in my of	erenu corul g
the thousand it	County State of
total distribution of the state	Control State of
tate of Indiana, Groom Donald W. Dugan	Hendricks County, State of HENDRICKS hat purpose by the Clerk of the Circuit Court of
ere by me united in marriage as authorized by a marriage license issued for toounty.	hat purpose by the Clerk of the Circuit Court ,
ounty.	5 1d Punde
ated this day of June, 1991.	Signed
	Official Designation Tone, 19
iled and recorded in accordance with the laws of the State of Indiana this	day of Jane Russell Clerk HENDRICKS Circuit Court
recorded in accordance with the laws of the State of	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By	APPLICATION FOR M	IARRIAGE LICENSE
Health under Authority	HENDRICKS	County Date of Application
of I.C. 31·1-3·2 Effective July 1, 1977	The device	to at approaching
		FEMALE Ranger Dated AT 12-81
MALE	12-19-81	Medical Examination Report Dated
Medical Examination Report Dated	Ray 400	Name of Physician AMKA & Heade
Name of Physician Audil to	lattly	ver procures the issuance of a incrise to marry by any false statement representation or pretensiver procures the issuance of a incrise to marry by any false statement representation or pretensiver procures the issuance of a incrise to marry by any false statement representation or pretensiver procures the issuance of a incrise to marry by any false statement representation or pretensiver procures the issuance of a incrine to marry by any false statement representation or pretensiver procures the increase of a increase to marry by any false statement representation or pretensiver procures the increase of a increase to marry by any false statement representation or pretensiver procures the increase of a incr
OURSTIONS MUST BE ANSWERED. LC. 31-1-	3-6 prescribed False statement - White	DEM ALE ARRICANT
shall be fined in any sum more		Maddle
MALE APPLICAN	1 last	Name Prof. 1911 Maginia Magoni,
Name First Middle	Goodnight	Date of Birth Minth 1
Date of Birth Month Day	1942	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)		Residence Address Street at R. R. City County State
Residence Address Street or R. B. City	County State	538 Enderly Blace dury of
538 Credistry France	way so	Previous Marital Status Never Matries D OR
Previous Marital Status: Never Married OR	0	Macroser Ended By Death D Discour & Annuirem S
Last Marriage Ended By: Death Divorce Annulment)	Date of birth verified by D Birth Certificate D Audicial Decree
Date of birth verified by: Birth Certificate Judicial Dec	cree	We Liver
Other (Specify)	101	Dither (Specify) No Yes D
Other (Specify) Are you now or have you ever been adjudged to be of unsound	i mind? No El Yes D	If answer is "yes" has the adjudicetime times comoved. No D Yes D
If answer is "yes", has the adjudication been removed?	10 - /1.	If answer is 'yes' that the adjustment of the same 'No Ves D
2. Are you afflicted with a transmissible disease*	No W Yes D	3. Are you related to the mair applicant closer than second cousin." No D Yes C
3. Are you related to the female applicant closer than second cou-	usin' No O Yes O	4 Are you now under the influence of intoxicating liquor No No No No.
4. Are you now under the influence of intoxicating liquor?	No D Yes D	5. Are you now under the influence of a naroutic drug" No D is D
5. Are you now under the influence of a narcotic drug?	, to 1 to	6 Last the full names of any dependent children
6. List the full names of any dependent children.	4	pour trudel argener
Melison Dogduight		Il me I fames to become III
Melance Spednigs	4	The same of the sa
Tharla Dovania	et .	and the second of the second
7. Are you required by any court order or orders to support the	above No D Yes D	7. Are you required to any court order or orders to support the above the children." No D. Yes D.
dependent children? If answer is "yes", it is required that this Application be accom-	manied by satisfactory proof that you are in	If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for these au		compliance with any court under it orders issued for their support.
	odniest	* Full name of father All All All All All All All All All Al
Residence of father (if deceased so state)	gld	Residence of bother of decoused so makes All All All All
Birthplace of father (State or foreign country)	ed.	Burthplace of father (State or foreign country)
Duth VI	50	y bull marden name of mother I / Jasep C. A seleman
9. Full maiden name of mother	1 11	Residence of mather of discrepand so states (Assaul), An.
Residence of mother (if deceased so state)	2.1	
Birthplace of mother (State or foreign country)	<i>(4)</i>	State of Indiana.
State of Indiana, County of HENDRICKS Bas: I de	epose and state the information given this application is true and correct	County of HENDRICKS and the supplication is true and correct.
Signedan Loc	ed neit	signal May Illagore
New Address 538 Enderly		Now assure 236 Bridgely are Generalry
19	420 081	20 July 199
Subscribed and sworn to before me this	ay of April 180	Subscribed and sworn to better me this the last of the service
May April 1 Dall Cler	rk HENDRICKS Circuit Court	1 12 11 1 Att Therest Ours HENDRICKS 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 massion. If only one opposit	We, the parents, of this applicant horsely give noment for this marriage. If only one parent
signs, state facts which render the consent of the other	r parent unnecessary	signs, elate facts which render the someont of the other parent unnecessary
		A MANAGEMENT OF THE PROPERTY O
		The state of the s
		The state of the s
State of Indiana, HENDRICKS		State of Indiana.
County of		County of HENDRICKS
Signed	Father	Signed
Signed	Mother	Signed Nother
Subscribed and sworn to before me this	day of	Subscribed and sworn to before me this day of
	Clerk	Clerk
COMPLETE IT WARDINGS IN		
HENDRICKS IS	SSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the
in County		Court by written order issued and filed
au	ithorizes and directs the issuance	of a marriage license to the above named parties.
Re It Remembered there was	TURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE
of Indiana dated the 24	IIINE	ense issued by the clerk of the HENDRICKS Circuit Court
DAVID L. GOODNIGHT	ady of	, 19 81, authorizing the joining together as husband and wife
Be it further remembered, the following man	rriage certificate was filed in	and MARY VIRGINA WAGONER
I,		hereby certify that on the 3 day of JULY
one thousand nine hundred and DAVID I GO	OODNICHT	at clermont Committee of MARION
and Roids MARY VIRGINA MAR	CONED	
and, Bride MARY VIRGINA WAG	0f	HENDRICKS County, State of IN
County	t by a marriage license issued to	That supplicks
Dated this3day of	JULY	81
	19	Signed BILLY JUDD
Filed and recorded in accordance with the la	anno ad all so	Official Designation MINISTER
and a second with the la	ws of the State of Indiana this	day of JULY 10 Bl
		Signed MAPY JAHF PIICCELL
		HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE 303 HENDRICKS _County

MALE	
Medical Examination Report Dated (0-15-8)	FEMALE Date of Application
Name of Physician Somes Blook	Medical Examination Report Dated (2-15-87
ALL OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 person 3	Name of Physician men Hage
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	pever procures the issuance of a licenset
MALE APPLICANT	a incense to marry by any false statement, representation or pretense
Name Paul Mobile	Name FEMALE APPLICANT
Date of Birth Month Day Year	Migdle Olast
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address Street or R. A. City County	Place of Birth (State(or foreign country) 3/ 1962
9791 T. 48 Sindley Gangar Shis	Residence Address Street or R. P. Street or R. P. P.
Previous Marital Status Never Married OR	Box152 Lister Gounty State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Lyuris Ligenne Wil mit	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers Science of picture	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes" has the adjudication been removed?	1. Are you now or have
No Yes	If answer is "yes", has the adjudication been removed? No Yes No Yes
2. Are you related to the female applicant closer than second annual 2	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Ves	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Ves U	4. Are you now under the influence of intoxicating liquor? No 10 Yes
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes No Yes
	6. List the full names of any dependent children.
7. Are you required by any court order or order to provide the court of the court o	
7. Are you required by any court order or orders to support the above dependent children No ☐ Yes ☐	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court prider or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father David Eugene & man	8. Full name of father Cololine Ray Schulp, Jr.
Residence of father (if deceased so state) Findlay, This	Residence of father (if deceased so state) Residence of father (if deceased so state)
Birthplace of father State or foreign country)	Birthplace of father (State or foreign country) Mississippi
9. Full maiden name of mother Martha Irene Walton	Parhaya Am Rica
Findley St.	9. Full maiden name of mother Auction Const. Files
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Indiana
State of Indiana. County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
	N. P. A. I.
Signed & Paul & Oman	Signed Mary K. Schulz
New Address 620 W. Scott Springfield, MO.	New Address 620 W. Scott Springfield, Mo.
Subscribed and sworn to before me this A day of June 1987	Subscribed and sworn to before me this day of July 19.01.
Transport Circuit Court HENDRICKS Circuit Court	Mary Jano Kussell Clerk HENDRICKS Circuit Court
7 7	
CONSENT OF PARENTS, PARENT OR GUARDIAN	
The second secon	CONSENT OF PARENTS, PARENT OR GUARDIAN
	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
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Signed Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Membered Membered, there was filed in my office a marriage licens of Indiana dated the Man Man Man Merit further remembered, the following marriage certificate was filed in my of REV. E. RAY SCHULZ, SR.	We, the parents, of this applicant hereby 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
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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 State of Indiana. County of HENDRICKS Signed Signed Mother Signed Mother Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County County Menumentary Menumentary License RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license if Indiana dated the May of REV. E. RAY SCHULZ, SR. Me thousand nine hundred and Blate of Indiana, Groom PAUL D. OMAN Menumentary	We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed
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APPLICATION FOR MARRIAGE LICENSE

File__ 18-19-81

....Circuit Court

HENDRICKS

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First Month Day Year Street of R. R. City County State As Marital Status: Never Married © OR Barrias Finded By Death Divorce Annulment Country Bus Marital Status: Never Married © OR Lavings Ended By Death Divorce Annulment Country Bus Marital Status: Never Married © OR Lavings Ended By Death Divorce Annulment Country Bus Marital Status: Never Married © Other (Specify) Dother (Specify) Dother (Specify) Dother (Specify) Dother (Specify) Prevous now or have you ever been adjudged to be of unacond mind? No Q Yes Country The you one will be a transmissible disease? The you one will be the influence of intaxicating liquor? No Q Yes Country The you on under the influence of an arcotic drug? The you on under the influence of an arcotic drug? The you on under the influence of a narcotic drug? The you on under the influence of a narcotic drug? The you on under the influence of a narcotic drug? The you on which you are or orders to support the above pendent children. The fall names of any dependent children. The you have the influence of a narcotic drug? The you one under the influence of a narcotic drug? The you of your dependent children. The fall names of father if deceased so state) The you of the your queler or orders issued for their support. The you of your order or orders issued for their support. The your dependent children? Signed Sheet State or foreign country) Lessience of father if deceased so state) The your deceased so state or foreign country order or orders issued for their support. The your deceased so state or foreign country order or orders issued for their support. The your deceased so state or foreign country order or orders issued for their support. The your deceased so state or foreign country order or orders issued for their support. The your deceased so state or foreign country order or orders issued for their support. The your deceased so state or foreign country order or orders issued for their support orders or orders issued for their support orders or order	of Birth Month Day Year of Birth (State or foreign equntry) Jence Address Street or R. R. City County State John Marriage Ended By: Death Divorce Annulment Divorce Information of birth verified by: Birth Certificate Judicial Decree Other (Specify) Are you now or have you ever been adjudged to be of unsound mind? Are you now or have you ever been adjudged to be of unsound mind? Are you afflicted with a transmissible disease? Are you related to the male applicant closer than second cousin? Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug? List the full names of any dependent children. Are you required by any court order or orders to support the above dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you compliance with any court order or orders issued for their support. Full name of father Residence of father tif deceased so state) Birthplace of father (State or foreign country) Full maiden name of mother Residence of mother (if deceased so state)
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Signed A British A. Smith New Address R R ROX BY STIFFWILL E TWO seribed and sworn to before me this.	ounty of HENDRICKS and this application is true and county of
New Address & R. BOX BY STIFFS WIFE TWO Scribed and sworn to before me this	Signed Sucar Jaylor
Seribed and sworn to before me this. Aday of	New Address RR JOX DX Dtle SVI
SENT 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	abscribed and sworn to before me this
the parents, of this applicant hereby give consent for this marriage. If only one parent is, state facts which render the consent of the other parent unnecessary. te of Indiana, HENDRICKS Signed	Many Jone Russell Clerk HENDRICKS Circuit
the parents, of this applicant hereby give consent for this marriage. If only one parent is, state facts which render the consent of the other parent unnecessary	Ciera Ciera
the parents, of this applicant hereby give consent for this marriage. If only one parent is, state facts which render the consent of the other parent unnecessary	ONSENT OF PARENTS, PARENT OR GUARDIAN
s, state facts which render the consent of the other parent unnecessary	Ve, the parents, of this applicant hereby give consent for this marriage. If only one
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RETURN OF MARRIAGE LICENSE. Be It Remembered, there was filed in my affice a marriage license	by written order issuedai
The Di Kemembereo, there was filed in my office a marriage license	
The Di Kemembereo, there was filed in my office a marriage license	AND MARRIAGE CERTIFICATE
Indiana dated the	issued by the start of the HENDRICKS Circuit
Indiana dated the 25th day of July	
e it further remembered, the following marriage certificate was filed in my offi	Susan & Taylor
Dewey H. Maciston	chy contifued to the state of t
te thousand nine nanarea and	114
ate of Indiana, Groom	# 1
0f	TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER
ounty.	THENCE SINGLE TO
ated this day of June, 1981	at purpose by the Clerk of the Circuit Court of HENDRICKS
, 19. \(\)	at purpose by the Clerk of the Circuit Court of HENDRICKS
O'iled and recorded in accordance with the laws of the State of Indiana this	at purpose by the Clerk of the Circuit Court of HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3:2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LIC

Effective July 1, 1944	County
MALE Medical Examination Report Dated 5 - 22-81	- 19-81 Det - 19-81
Name of Physician R. B. Wllaw	LEMALE
Name of Physician Name of Physician	Medical Examination Report Dated 5-22-8
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—W shall be fined in any sum not exceeding five hundred dollars (\$500.000"	hoever programs the
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Wishall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	by said a tile issuance of a license to marry by any false statement, representation or prete
Name Middle Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	Date of Birth Month 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)
on something.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment O	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment O
Other (Specify) Courses dia Was	Date of birth verified by: Birth Certificate Judicial Decree
The second second	A Other (Specify) Daises Lies U Gist
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease?	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease? No Are you related to the male and live at the male a
4. Are you now under the influence of intoxicating liquor? No Yes□ No Yes□ No Yes□	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No Yes Yes
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
Jak 6	6. List the full names of any dependent children.
	Mars.
7. Are you required by any court order or orders to support the above	
dependent children? No 🗆 Yes 🗆	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
8. Full name of father Oak Day Woods	compliance with any court order or orders issued for their support 8. Full name of father Publish D. Hand and the
Residence of father (if deceased so state)	8. Full name of father (if deceased so state) Second
Birthplace of father (State or foreign country)	
9. Full maiden name of mother Many & Collins	Birthplace of father (State or foreign country)
Residence of mother (if deceased so state)	9. Full maiden name of mother 3 to Ray so
Birthplace of mother (State or foreign country)	Residence of mother (if deceased so state)
State of Indiana,	Birthplace of mother (State or foreign country) State of Indiana, I denose and state the information give
County of HENDRICKS ss: 1 depose and state the information given in this application is true and correct.	County of HENDRICKS State of Indiana, HENDRICKS I depose and state the information give in this application is true and correct the state of th
Signed & Morris Oworks	Signed & Marily T. Har deveal
New Address /102 N. Edge word Dr.	New Address 1102 A. Edgewood Deve
Subscribed and sworn to before me this day of , 1981.	Subscribed and sworn to before me this day of , 19 9
Many Con Rugas Ocierk HENDRICKS Circuit Court	Many Con Russell Clerk HENDRICKS Circuit Cour
ONSERVE OF PROPERTY	OF CHARMAN
ONSENT 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 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
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which female the consens of
eate of Indiana, bunty of HENDRICKS ss:	State of Indiana, HENDRICKS County of
	Signed
Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of19
bscribed and sworn to before me thisday of, 19	Subscribed and sworn to belove the Company of the C
Clerk	
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS	art by written order issued
authorizes and directs the issuance of	i a marriage needs to
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens Indiana dated the 23th day of	, 19. A, authorizing the joining together as husband and wife
MODRIC O MOORE	DU
Indiana dated the 23td day of an MORRIS O. WOODS an it further remembered, the following marriage certificate was filed in my of h	fice, to-wrt:
ROBERT P. MAC DONALD	WARCOURT FARM R. I MILE County of
thousand nine hundred and 81	County, State ofINDIANA
of Indiana Cross MOODS	County State of Land + Charles
re by me united: MARILYN H. HARDWICK	hat purpose by the Clerk of the Circuit Court of
	The state of the s
tted this 27th day of JUNE , 19 8	OF EDCYMAN
O	Official Designation JULY ,19 81

....day ofJULY

MARY JANE RUSSELL HENDRICKS

...Clerk Circuit Court

6th

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

Re. Mamage

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

306 6-22-81

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977 APPLICATION FOR HENDRIC	MARRIAGE LICENSE County C
Effective July 1, 1977	EFMALE / 155
MALE Continue Papert Dated Co-(5-8)	Medical Examination Republic
Medical Examination Report Button	Name of Physician James Dlack
Name of Physician (Who	never procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 preservices and shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Eirgo Middle I Jast
Name Effst Middle Hunling	Date of Birth Month
Date of Birth Month	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Chio
Residence, Address Street or R. R. Citx County State	Regidence Address Street or R. R. City Gunty State R. I. Coateswelle, Andreas Maries Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Voters Registration
Other (Specify)	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes [
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed? No Yes O
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease" No. Yes
3. Are you related to the female applicant closer than second cousin?	Are you related to the male applicant closer than second cousin? No. Yes Are you now under the influence of intoxicating liquor? No. Yes
4. Are you now under the influence of intoxicating liquor? No Yes Yes Yes	4. Are you now under the influence of a narcotic drug? No Yes D
5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.	6. List the full names of any dependent children.
V. District an indicate and any department of the control of the c	
	7 Are you required by any court order or orders to support the above
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	dependent children? No Ves C
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Q 2 20 0 0 0	O a Day of
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
5. Full maiden name of mother Access	9. Full maiden name of mother
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Washer
County of HENDRICKS State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.	State of Indiana. County of HENDRICKS Sax: I depose and state the information given in this application is true and correct.
Value of Number	v6le of the los
New Address RAI Coalesville D.	Signed NRI Contesville Inc
Subscribed and sworn to before me this. 32 day of June 1987	New Address () ()
Mary Janu Russill Clerk HENDRICKS Circuit Court	Subscribed and sworn to before me this day of Jerre 1981. Mary Jane Ressell aerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS PARENTS OF GRAPHIA
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, County of HENDRICKS ss:	State of Indiana,
	County of HENDRICKS
Signed Father	Signed Father
Signed	Signed Mother
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me thisday of19
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLL	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County Superior Co	ourt by written order issued and filed
in clubs office authorizes and directs the issuance of	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 licer of Indiana dated the day of	nse issued by the clerk of the HENDRICKS Circuit Court
Louis D. Hunley day of June	nse issued by the clerk of the HENDRICKS Circuit Court 19 , authorizing the joining together as husband and wife and Eleanor Hunley office, to-wit:
Be it further remembered, the following marriage certificate was filed in my	and Cleanor Hunley
one thousand air I see See	hereby certify that and the 22
State of Indiana Green Chile	and office, and the service of the s
and, Bride Electron Hunley	of Henl, County of
and, Bride E econor Hunley were by me united in marriage as authorized by a marriage license issued for County.	Hond. County, State of 10
were by me united in marriage as authorized by a marriage license issued for Dated thisday of June	that purpose by the Clerk of the Circuit Court of HENDRICKS
, 19	
	Signed Mary Jane R. Asell
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation your Hard to.
of the State of Indiana this	day of June.

Health under Authority of 1C 31 1 3 2 Effective July 1, 1977 HENDRIC	MARRIAGE LICENSE No. 307 File
MALE Medical Examination Report Dated 4-16-81	County Le -22-8/ Date of Application
Name of Physician Lucing Cohen	Medical Examination Report Dated (0-1/4-8)
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Wi	Name of Physician Living (The W) hoever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	moever procures the issuance of a license to marry by any false statement, representation or pretense
Name Paul Middle Mast.	Name First.
Date of Birth Month Day Year Demux Place of Birth (State or foreign country)	Date of Birth Month Month Jast
Residence Address Syeet or R. R. City Ind	Place of Birth (State of loreign country)
9211 Mt. Shaota bridges Food.	Residence Address Street or R. R. County County Chate
Previous Marital Status Never Married OR Last Marriage Ended By: Death Divorce Annulment O	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Other (Specify) Drivers Leaine whether	Date of birth verified by: Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Ves	1 Are vous some a land a second a land a land
If answer is "yes" has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?	1. Are you now or have you ever been adjudged to be of unsound mind. No □ Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □
3. Are you related to the female applicant closer than second cousin? No Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Ves U	3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No □ Yes □
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.
	Kellie Rae Joral
7. Are you required by any court order or orders to support the above	The Residence of the Particular Control of t
dependent children? No Ves If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	7. Are you required by any court order or orders to support the above dependent children?
compliance with any course order or orders assued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Carl De Hay Bens	8. Full name of father famus William Myers
Residence of father (if deceased so state)	Residence of father (if deceased so state) Alganeed
9. Full maiden name of mother. Folche Fern Mayana	Birthplace of father (State or foreign country) Hest Guckly
Residence of mother (if deceased so state) Residence of mother (if deceased so state)	9. Full maiden name of mother // /aude fone Crouch
Birthplace of mother (State or foreign country) Union City Ind.	Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country)
State of Indiana. County of HENDRICKS State of Indiana. I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS 88: I depose and state the information given
X faul Be	County of Signed X Mildred M Ford
New Address 1813 Naurthone	New Address 1813 Haut Lang Phifle
Subscribed and sworn to before my this 22 day of June 1987.	Subscribed and sworn to before me this 22 day of June, 18.
Mary and Ruspell Clerk HENDRICKS Circuit Court	Mary Jane Russellark HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana,
County of HENDRICKS 88:	County of
Signed Father	Signed Father Mother
Signed Mother	Signed Mother Subscribed and sworn to before me this day of 19
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance of	nrt hv Willen Order
PETURN OF MARRIAGE LICENSE	E 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
day of day of	, MILDRED M. FURD
Be it further remembered, the following marriage certificate was filed in my of	greeby certify that on the 11 day of JULY NOTICE TO SHOW THE SHOW
one thousand nine I Nove 181	INDPLS. , County of MARTON ,
State of Indiana, Groom PAUL R. BEMIS	NDRICKS County, State of IN
Be it further remembered, the following marriage certificate was filed in my of I,	hat surpose by the Clerk of the Circuit Court of
County of the marriage as authorized by a marriage	
Dated this 26 JUNE , 19.	Signed HARRY H. HOWELL MINISTER Official Designation JULY , 19 day of Clerk
- Juliality of the Control of the Co	Official Designation

day of MARY JAME RUSSELL

Signed ...

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

..Clerk

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of

Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

Date of Application

of I.C. 31-1-3-2 Effective July 1, 1977 FEMALE Medical Examination Report Dated MALE Medical Examination Report Dated Name of Physician. ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense and prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense and prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense and prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement. shall be fined in any sum not exceeding five hundred dollars (\$500,00)" FEMALE APPLICANT MALE APPLICANT Date of Birth 3006 Previous Marital Status: Never Married Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Undicial Decree Date of birth verified by: Birth Certificate Judicial Decree Other (Specify) □ Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D No Yes 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed? No T Yes No Yes If answer is "yes", has the adjudication been removed 2. Are you afflicted with a transmissible disease 2. Are you afflicted with a transmissible disease 3. Are you related to the male applicant closer than second cous 3. Are you related to the female applicant closer than second cousin 4. Are you now under the influence of intoxicating liquor? No Yes 0 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children. 6. List the full names of any dependent children Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No Tyes No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Residence of father (if deceased so state) Birthplace of father (State or foreign countr Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) and state the information given State of Indiana, depose and state the information given n this application is true and correct. State of Indiana, HENDRICKS County of County of .. HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, State of Indiana, HENDRICKS County of HENDRICKS County of..... Signed .. 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 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 officefa marriage license issued by the clerk of the..... HENDRICKS I, _____hereby certify that on the 27 _____day of ____June State of Indiana, Groom Jack D. Hunter II of Allen County, State of IN and, Bride Denise M. Hodge 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, State of IN June Dated this Signed Charles G. Burnside Official Designation Minister

Signed Mary Jane Russell

HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

309

MALE	County (p-22 S1
W. Had Evamination Report Dated	Date of Application
Vt 1.0	LUIALE
Name of Physician Surat Burns	Medical Examination Report Dated 6-5-87
ALL OUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 procords at the	Name of Physician Stuns & Burns
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	pever procures the issuance of a E
ALL QUESTIONS MUST BE ANSWERED. L.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Il a ficense to marry by any false statement, representation or pretense
Name First Middle Offast	FEMALE ADDITION
Date of Birth Month Day Merrich	Name Wirst Middle
4	Date of Birth Marth
Place of Birth (State or foreign country)	Day Year
Residence Address Street of R. B. City Court	Place of Birth (State or Goreign country)
534 The O'Nell Brownsburg Kend Sind	Residence Address Street 69 R. R.
Previous Marital Status: Never Married OR	334 71. Thill B'airg Rend State
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth vyrified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Date of Direct Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers Lecense Wheating	Judicial Decree
freunk	Other (Specify) Druess License apricture
Manager is "yes" has the adjudication been removed?	1. Are you now or have your
No U Yes U	If answer is "vos" has the add to
No Test	2. Are you afflicted with a transmissible disc.
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male and in the male
4. Are you now under the influence of intoxicating liquor? No by yes	4. Are you now under the influence
5. Are you now under the influence of a narcotic drug? No Yes O	5. Are you now under the influence of a narcotic drug? No Yes No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Jessica Marie Sherriel	
	Jennifer Louise Gore
	THE CHIEF THE PROPERTY OF THE PARTY OF THE P
7. Are you required by any court order or orders to support the above	2 10 10 10 10
dependent children' No Ves	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order, or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Colort Hegyry Shesself.	8. Full name of father Frank Edward Cerk
Residence of father (if deceased so state) Sailer Lenney Vania	4 11 3 11
· Class I a D	Residence of father (if deceased so state) / 1. Mcago SC.
Birthplace of father (State or foreign country) Harrison sup, wenn.	Birthplace of father (State or foreign gountry) Ellensis
9. Full maiden name of mother Cluse Thy Faulkner	9. Full maiden name of mother Joan High
Residence of mother (if deceased so state) Januar Renn.	h desta la l
D'	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Tennoylvania	Birthplace of mother (State or foreign country) Inapple Sel.
State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct.	State of Indiana,
County of HENDRICKS in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
y David & Xherriel	" x Mephain of Sono
Signed Total All Maria Donald Maria Con	Signed Wywarte 1 . Kill .
524 NI DIDELL KKUNNIKUVO II	1-21 (h Dolan Bilion
New Address 534 N ODELL BROWNSBURG	New Address 534 97 Odell B Gur
20	New Address 534 9 Odell B Ourse, Subscribed and sworp to before me this 22 day of June 1981
Subscribed and sorn to before me this 22 day of June 1901.	Subscribed and sworn to before me this 22 day of June 1987.
20	Subscribed and sworn to before me this 22 day of June 1987
Subscribed and soon to before me this 22 day of Just 187. The ry Jane Austell Clerk HENDRICKS Circuit Court	Subscribed and sworn to before me this 22 day of June 1981. Subscribed and sworn to before me this 22 day of June 1981. Clerk HENDRICKS Circuit Court
Subscribed and April to before me this 22 day of Jule 187. The ry and Australian Clerk HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN	Subscribed and sworn to before me this 22 day of July 1987. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and soon to before me this 22 day of June 1907. The ry face Australia Clerk HENDRICKS Circuit Court	Subscribed and sworn to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sorn to before me this 22 day of Jule 1801. HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 22 day of July 1987. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sorn to before me this 20 day of Jule 180. The ry and Austell Clerk HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN	Subscribed and sword to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sorn to before me this 22 day of Jule 1801. HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sorn to before me this 22 day of Jule 1801. HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sorn to before me this 22 day of Jule 1801. HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Subscribed and sworn to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and soorn to before me this 20 day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.	Subscribed and sword to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.
Subscribed and sorn to before me this 20 day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana,	Subscribed and sworn to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana, HENDRICKS
Subscribed and soorn to before me this 20 day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.	Subscribed and sworn to before me this 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, HENDRICKS State of Indiana, HENDRICKS Father
Subscribed and sorn to before me this 20 day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana,	Subscribed and sworn to before me this 2 day of 4.1954. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed. Father
Subscribed and soorn to before me this	Subscribed and sworn to before me this 22 day of 418 1984. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed. Signed. Father Signed. Mother
Subscribed and soorn 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 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 22 day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed. Signed. Father Signed. Mother
Subscribed and soorn to before me this 202 day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS } Signed Father	Subscribed and sworn to before me this 22 day of 4.1951. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed. Father
Subscribed and soorn 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 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 22 day of 418 1984. Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed. Signed. Father Signed. Mother
Subscribed and soorn to before me this	Subscribed and sworn to before me this. Aday 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, HENDRICKS Signed. Father Signed. Mother Subscribed and sworn to before me this. day of
Subscribed and soorn to before me this	Subscribed and sworn to before me this. Aday 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, HENDRICKS Signed. Father Signed. Mother Subscribed and sworn to before me this. day of
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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } ss: Signed Father Signed Mother Subscribed and sworn to before me this day of 19	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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this. Clerk A marriage license having been refused to the above named parties, the part by written order issued. and filed
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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS 88: Signed	Subscribed and sworn a before me this. A day of HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed. Father Signed. Mother Subscribed and sworn to before me this. day of 19 Clerk C. A marriage license having been refused to the above named parties, the art by written order issued. and filed a marriage license to the above named parties.
Subscribed and Morn to before me this AQ day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS ss: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of the consent of the other parent unnecessary.	Subscribed and sworn a 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this. A marriage license having been refused to the above named parties, the art by written order issued and filed a marriage license to the above named parties.
Subscribed and Morn to before me this A day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this. 22 day of June 1957. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS Signed
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Subscribed and a prin 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 parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of. Signed. Signed. Mother Subscribed and sworn to before me this day of. 19. Clerk C. A marriage license having been refused to the above named parties, the art by written order issued. and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is sued by the clerk of the state of the parent unnecessary. C. A marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is sued by the clerk of the state of the joining together as husband and wife STEPHANIE L. GORE d. STEPHANIE L. GORE d. HENDRICKS TINDIANA HENDRICKS TINDIANA County of TINDIANA HENDRICKS TINDIANA TINDIANA TINDIANA TINDIANA
Subscribed and a prin 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 parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of. Signed. Signed. Mother Subscribed and sworn to before me this day of. 19. Clerk C. A marriage license having been refused to the above named parties, the art by written order issued. and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is sued by the clerk of the state of the parent unnecessary. C. A marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is sued by the clerk of the state of the joining together as husband and wife STEPHANIE L. GORE d. STEPHANIE L. GORE d. HENDRICKS TINDIANA HENDRICKS TINDIANA County of TINDIANA HENDRICKS TINDIANA TINDIANA TINDIANA TINDIANA
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Subscribed and corn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } as: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County. in authorizes and directs the issuance of Indiana dated the day of Indiana dated the day of Indiana dated the DAVID L. SHERRIEB and DAVID L. SHERRIEB and DAVID L. SHERRIEB and DAVID L. SHERRIEB and DAVID L. SHERRIEB one thousand nine hundred and 81 State of Indiana, Groom STEPHANIE L. GORE of the County. Were by me united in marriage as authorized by a marriage license issued for the County. LINE 19 83.	State of Indiana. County of Signed. Subscribed and sworn to before me this. Signed. Subscribed and sworn to before me this. Signed. Subscribed and sworn to before me this. Subscribed and sworn to before me this. Subscribed and sworn to before me this. A marriage license having been refused to the above named parties, the arriage license to the above named parties. AND MARRIAGE CERTIFICATE e issued by the clerk of the 19. AND MARRIAGE CERTIFICATE e issued by the clerk of the subscribed and wife STEPHANIE L. GORE Monther 19. Circuit Court 19. And of Hendricks Circuit Court 19. The propose by the Clerk of the Circuit Court of 19. 19. 19. 19. 19. 19. 19. 19
Subscribed and corn to before me this day of HENDRICKS Circuit Court CONSENT OF PARENTS. PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS } as: Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURTHENDRICKS County. in authorizes and directs the issuance of Indiana dated the day of Indiana dated the day of Indiana dated the DAVID L. SHERRIEB and DAVID L. SHERRIEB and DAVID L. SHERRIEB and DAVID L. SHERRIEB and DAVID L. SHERRIEB one thousand nine hundred and 81 State of Indiana, Groom STEPHANIE L. GORE of the County. Were by me united in marriage as authorized by a marriage license issued for the County. LINE 19 83.	State of Indiana. County of Signed. Subscribed and sworn to before me this. Signed. Subscribed and sworn to before me this. Signed. Subscribed and sworn to before me this. Subscribed and sworn to before me this. Subscribed and sworn to before me this. A marriage license having been refused to the above named parties, the arriage license to the above named parties. AND MARRIAGE CERTIFICATE e issued by the clerk of the 19. AND MARRIAGE CERTIFICATE e issued by the clerk of the subscribed and wife STEPHANIE L. GORE Monther 19. Circuit Court 19. And of Hendricks Circuit Court 19. The propose by the Clerk of the Circuit Court of 19. 19. 19. 19. 19. 19. 19. 19
State of Indiana. County of HENDRICKS Signed Signed	Subscribed and swore to before me this. And day of. Sure HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. Signed. Father Signed. Mother Subscribed and sworn to before me this. day of. 19 Clerk C. A marriage license having been refused to the above named parties, the parent by written order issued. and filed a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court to issued by the clerk of the street by which is the property of the country of the poining together as husband and wife street or the street of th

Signed.

APPLICATION FOR MARRIAGE LICENSE

310 Date of Application

alth under Authority LC 31-1-3-2 HENDRIC	MARRIAGE LICENSE KS County Date of Application
fective July 1, 1977	FEMALE institut Report Dated 6 22-51
MALE Medical Examination Report Dated 6-22-81	Medical Examination Report 2
Medical Examination	Name of Physician & Cook
Name of Physician 1.6. 31.1.3.6 prescribed "False statement—Who	pever procures the issuance of a license to marry by any false statement, representation or preter
all he fined in any sum nor carry	
MALE APPLICANT	Name First Middle Last
ame Randa Year	Date of Birth Month Day Year
ate of Birth Month Day	Place of Birth (State or foreign country)
lace of Birth (State or foreign country)	Residence Address Street or R. R. City County State
esidence Address Street or R. R. City County	
revious Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
act Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	A Other (Specify) Drivers & in spirit . Voto
Other (Specify) Drivers Live of prot	1. Are you now or have you ever been adjudged to be of unsound mind? No Y
. Are you now or have you ever been adjudged to be of unsound mind?	If answer is "yes", has the adjudication been removed. No D y
If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease" No 🗘 Y
Are you afflicted with a transmissible disease? No 4 Yes No 4 Yes Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No 🗓 1
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No D
i. Are you now under the influence of a narcotic drug?	Are you now under the influence of a narcount drug. List the full names of any dependent children.
List the full names of any dependent children.	Nose.
More	
	Travel - Tra
	7 Are you required by any court order or orders to support the above
Are you required by any court order or orders to support the above dependent children?	dependent children"
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support	8 Full name of father
0 0 0	Residence of father (if deceased so state)
Residence of father (if deceased so state)	Birthplace of father (State or foreign country)
Birthplace of father (State or foreign country)	malital -
9. Full maiden name of mother There are a supplied to the supp	9. Full maiden name of mother.
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information
County of HENDRICKS ss: I depose and state the intolliation is true and correct.	County of HENDRICKS as: in this application is true and or
Signed Concluded	Signed & Jill Dalyers
New Address	New Address (30x9)
Subscribed and sworn to before me this	Subscribed and sworn to before me this day of
Clerk HENDRICKS Circuit Court	Clerk HENDRICKS Circuit
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 parent	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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, HENDRICKS }ss:	State of Indiana,
County of	County of HENDRICKS
Signed. Father	Signed
Signed Mother	Cold and the control of the control
Subscribed and sworn to before me thisday of, 19,	and sworn to before me this day of
Clerk	A second
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO	LIDT A
County	Count 1
inauthorizes and directs the issuance	te of a marriage license to the above regard parties
RETURN OF MADDIAGE TYON	
, and object a marryine is	Conso regard by the training the second by t
Rand The day of day of	, 19 , authorizing the joining together as husband an
Be it further remembered, the following marries	and
one thousand nine hundred and	at Day of day of
State of the state	County of
State of Indiana Groom & and I T Ricch	of Herd
one thousand nine hundred and S State of Indiana, Groom Randy J. Browler and, Bride J. M. Salyers of	of Herd County, State of HD

Official Designation ...

.. Circuit Court

HENDRICKS

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

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

....Clerk

...Circuit Court

MARY JANE RUSSELL HENDRICKS

THE NEXT THE PARTY OF THE PARTY	County
MALE	Date of Application
Medical Examination Report Dated 0-19-81	FEMALE Medical Examination Parast D
Name of Physician Boker	Medical Examination Report Dated 6-19-81
IL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement, Wa	Name of Physician B. Baker
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Whose fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation or pretense
First Man	FEMALE APPLICANT
steven D. Last	Name First
Day Year	Date of Birth MALL Jan, Hallands.
Place of Birth (State or foreign copptry)	Pay Year
esidence Address Street or R. R. City , County State	Place of Birth (State or foreign country) Residence Address
1030 Harrenda Daniel Bo. State	Street or R. R. City County State
Previous Marital Status: Never Married OR	1 forman orders allers
ast Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
A Other (Specify) Danies Sio, whiat.	Judicial Decree
	Other (Specify)
If answer is "yes" has the adjudication been removed? No P Yes N	1. Are you now or have you ever been adjudged to be of unsound mind?
If answer is yes has the adjudication over removed. No Yes U Are you afflicted with a transmissible disease? No Yes U	If answer is "yes", has the adjudication been removed?
2. Are you arricled with a transmission disease. 3. Are you related to the female applicant closer than second cousin? No A Yes	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin? No S. Yes D. A. Are you never the influence of the country of the countr
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No Yes No Yes
8. List the full names of any dependent children.	6. List the full names of any dependent children.
repeal attenual	
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Jack Lander	8. Full name of father Casey R. Hockaday
Residence of father (if deceased so state) & D. L. Q.	Residence of father (if deceased so state) Source Study
X	Birthplace of father (State or foreign country) Wissons
Birthplace of father (State or foreign country)	Distributed latter totaled total and the Same
9. Full maiden name of mother	9. Full maiden name of mother
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Musicon State or foreign country)
State of Indiana.	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of Ochoka County
Signed Lucin T. Carder	Signed Signed
New Address 1030 Hacienda Dr. Wannille	New Address / O O O O O O O O O O O O O O O O O O
By sold in	Subscribed and sworn to before me this
A C LEVIDDICES	Massa Care Russell Glerk HENDRICKS Circuit Court
May Jone Knasal Q Clerk MCHARICKS Circuit Court	The state of the s
	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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which
	State of Indiana, HENDRICKS
State of Indiana, Country of HENDRICKS \$ 58:	County of
County of	Signed
Signed	Signed Mother
Signed Mother	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this
and sworn to before me this	
	JRT. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	JRT. A marriage license having been refused to the and filed Court by written order issued
HENDRICKS County	Court by written order issued. e of a marriage license to the above named parties. HENDRICKS Circuit Court
CI I in may office it must be a	11 II wind the lotting by
of Indiana dated the	and CATHY HOCKADAY
CORPORED CARDED	office to-wit:
Be it further remembered, the following marriage certificate was filed in my	and for office, to-wit: fo
I, ALFRED HELLERT	
State of Indiana, Groom STEVEN CARDER	of HENDRICKS County, State of IN HENDRICKS County, State of IN HENDRICKS HENDRICKS or that purpose by the Clerk of the Circuit Court of HENDRICKS 81 Signed REV. ALFRED HELLERT
and, Bride CATHY HOCKADAY	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. Dated this 1 day of JULY , 19	81 Signed REV. ALFRED HELLERT
Dated this 1 day of JULY	Signed REV. ALFRED BELLERT Official Designation JULY ,19 81
	Official Designation JULY Clerk

Official Designation.
13 da

Signed.

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CO TO THE REAL PROPERTY.	No. of Lot	COLUMN TO SERVER

APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By	ON FOR M	IARRIAGE LICENSE	File
Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICK	SCounty	Date of Application
MALE 5-28-8/		FEMALE Medical Examination Report Da	ated 528-81
MALE Medical Examination Report Dated 5-28-8/		Name of Physician	
Name of Physician Chic Clarke ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "Fals and exceeding five hundred dollars (8500.00)"	(ataman) - Whoe	ver procures the issuance of a license to marry	in any false statement representation or preten-
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "Fais shall be fined in any sum not exceeding five hundred dollars (\$500,00)"	e statement 1738	FEMALE	APPLICANT
shall be fined in any sum not executed MALE APPLICANT		Name First	Maddle 11 law
Name First Middle	last	Date of Birth Menty	ann Hartin
Date of Birth Mooth Day Yea	538	Place of Birth (State or foreign country)	28 1945
Place of Birth (State or foreign country)			Chip.
Residence Address Street of R. R. City County	State	24 // artin Wa	State State
Previous Marital Status: Never Married OR		Previous Marital Status Never Married O OB	Annulment []
Last Marriage Ended By: Death Divorce Annulment		Date of birth verified by Birth Certificate	D Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree		De o	Lune
Other (Specify)	No D Yes D	Other (Specify) Are you now or have you ever been adjudged to	to be of unsound mind? No W Yes D
1. Are you now or have you ever been adjudged to be of unsound mind?	No D Yes D	If answer is "yes" has the adjudication been re	
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	No □ Yes □	2 Are you afflicted with a transmissible disease	
Are you related to the female applicant closer than second cousin.	No Yes O	3 Are you related to the mair applicant closer th	
4. Are you now under the influence of intoxicating liquor?	No D Yes D	4 Are you now under the influence of intoxication	7
5. Are you now under the influence of a narcotic drug?	No T Yes D	5 Are you now under the influence of a narcotic 6 List the full names of any dependent children	
6. List the full names of any dependent children.		6 List the four names so only sequences	
		7 Are you required by any court order or orders	s to support the above
 Are you required by any court order or orders to support the above dependent children? 	No□ Yes□	7. Are you required by any court order or orders dependent children.	No D Yes D
If answer is "yes", it is required that this Application be accompanied by satisfactory pr	oof that you are in		eation be accompanied by satisfactory proof that you are in
compliance with any court order of orders issued for their support	ahl	compliance with any court order or orders assu	and for their support.
8. Full name of father / Manual Manua		8 Full name of father LL All 1	densed
Residence of father (if deceased so state)		Residence of father (if deceased so state)	Christian .
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	and it
9. Full maiden name of mother Allen	- 0	9 Full maiden name of mother JAMI	Juasell
Residence of mother (if deceased so state)	th.	Residence of mother (if deceased so state)	Jindry K.
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country).	akla.
State of Indiana, County of HENDRICKS as: I depose and state the infinithis application is true		State of Indiana. County of HENDRICKS	ss: I depose and state the information given in this application is true and correct.
Mary 1/ Kanas	Lan	H	This you Smart
New Address 2 Martin Relation	nelle	New Address 33	marty or Dan
Subscribed and sworn to before me this 34 day of May	. 1921.	Spheribed and sworn to before me this.	2 4 any of Asset 1881
Theref and Maself Clerk HENDRICKS	Circuit Court	Il any and the	Cherk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN			
We, the parents, of this applicant hereby give consent for this marriage. If c	anla ana anna	CONSENT OF PARENTS, PARENT OR G	
signs, state facts which render the consent of the other parent unnecessary			rive consent for this marriage. If only one parent
and parent uniteressary		signs, state facts which render the consent	of the other parent unnecessary
			AND A CONTROL OF THE
			AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
Shade of Indiana			The state of the s
State of Indiana, County of HENDRICKS Ss:		State of Indiana, County of HENDRICKS	} **:
Signed	rachet	Signed	Father
Signed		Signed	Mother
Subscribed and sworn to before me thisday of		Subscribed and sworn to before me this	day of
	Clerk		Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDI	ER OF COURT	C. A marriage license having been re	of used to the shows named parties, the
HENDRICKS County authorizes and direct	Cou	art by written order issued	and filed
and directs	s the issuance of	a marriage license to the above name	ed parties.
of Indiana dated the day of	diens	se issued by the clerk of the	HENDRICKS Circuit Court
Be it further remembered, the following marriage certificate wa	is filed in my of	nd Patricia ann	e joining together as husband and wife
one thousand nine hundred and	h	ereby certify that on the	and July
one thousand nine hundred and State of Indiana, Groom	h n	u Danville	day of Jonauchs
and, Bride Atticia	mula son o	1. Nenduch	County State of Indiana
were by me united in marriage as authorized by a	of	Hendricks	County, State of Midland
County.	nse issued for t	hat	t Court of HENDRICKS
Dated this day of June	, 19 8		. 0
		Signed U. Dr. 1	Pugh
Filed and recorded in accordance with the laws of the State of 1	Indiana this	Official Designation Mines	the
		Signed William A	(leg) 10 81 Clerk
		signed fluig fail	HENDRICKS Circuit Court
			HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

42 18-45-0 Date of Application

_County MALE FEMALE
Medical Examination Report Dated \ \(\sigma - 23 - 81 \) Medical Examination Report Dated_ Name of Physician_

ALL QUESTIONS MUST BE ANSW	VERED. LC. 31-1-3-6;	prescribed "False statement	Name of Physician C. & Hi	
shall be lined in any sum in exceeding	E APPLICANT	× (8500,00)".	Name of Physician . He is to marry by any false statem	
Name First	Middle		y by any false statem	ent, representation or pretense
Lead	8	Dayles .	Name First FEMALE APPLICANT	
Date of Direct	Day 2	Year Year	Date of Rival	Q Last
Place of Birth (State or foreign country)	d	10	Day	Year
Residence Address Street or R.	R. City	County State	Place of Birth (State or foreign country)	43 0
11911 M. Jon	a ship Rd	Jedgl.	Residence Address Street or R. R. City	The state of the s
Previous Marital Status. Never Married	An artist to the same of the s	THE RESERVE AND ADDRESS.	Downship Rd.	County State
Last Marriage Ended By Death Divorce		THE REST OF THE REST.	Previous Marital Status: Never Married OR	THE RESERVE AND ADDRESS OF THE PARTY OF THE
Date of birth verified by Birth Certifica	ite U Judicial Decree	A P of the long hand	Last Marriage Ended By: Death Divorce Annulment Date of high way o	and officers on the last
Q Other (Specify) Dissi	sid ease		Date of birth verified by: Birth Certificate Judicial Decree	W.D on tollier Con as and
1. Are you now or have you ever been adjudge	red to be of unsound mind!	2 . Ku	Other (Specify) Drivers Sie	
If answer is "yes" has the adjudication bee		No D Yes D	1. Are you now or have you ever been adjudged to be of unsound mind?	
2. Are you afflicted with a transmissible dises	ase*	No 7 Yes D	answer is "yes", has the adjudication been removed?	No Yes O
3. Are you related to the female applicant close	ner than second cousin?	No ₽ Yes □	2. Are you afflicted with a transmissible disease?	No ♥ Yes □
4. Are you now under the influence of intoxics		Not Yes D	Are you related to the male applicant closer than second cousin?	No ♥ Yes □
5. Are you now under the influence of a narce		No □ Yes □	4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of intoxicating liquor?	No Yes 🗆
6. List the full names of any dependent children	rest.		Are you now under the influence of a narcotic drug? List the full names of any dependent children.	No ♥ Yes □
Janes D. D	Aprordas	No. No. Oct.	South Results	
Mahma for	" 0	Charles II	2 Pastley	Alle socialing
		A STATE OF THE STA	Janey 11	THE MANUAL PROPERTY.
7. Are you required by any court order or order	ers to support the above		Vietie "	
dependent children		No□ Yes□	7. Are you required by any court order or orders to support the above dependent children?	the wife of Parigons per end. I
If answer is "yes", it is required that this Ap-	plication be accompanied b	by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by	No □ Yes □
compliance with any court order or orders in	ssued for their support.	Street Street Street	compliance with any court order or orders issued for their support.	satisfactory proof that you are in
8. Full name of father Const.	- war	h	8. Full name of father Ded Suith	E. Lawrence
Residence of father (if decraised so state)	barrage C		Residence of father (if deceased so state)	2012.
Birthplace of father (State or foreign country)	Sud.		Birthplace of father (State or foreign country)	1
9. Full maiden name of mother	useald	Reth	M. C.	chan
Residence of mother of decreased so state)	S. D.		9. Full maiden name of mother Tany	eclia -
	00		Residence of mother (if deceased so state)	SANDER SERVICE AND ADDRESS.
Birthplace of mother: State or foreign country State of Indiana.	1		Birthplace of mother (State or foreign country)	Ship short-source.
County of HENDRICKS	sa: I depose and in this app	d state the information given lication is true and correct.	State of Indiana, County of HENDRICKS Sas: I depose and in this applies the same of th	state the information given ication is true and correct.
	15 M	6-1-	County of	1 +1
Signed	16. 1000	1.701	Signed May 7	Jarley
New Address, 1911	W. Zowny	plays Kot.	New Address 11241 To. Toe	rislip (2).
Subscribed and sworn to before me than	day of	15.01. soul	Subscribed and sworn to before me that day of	6 23/0 19 El
Mary Jone Russ	Gerk HEN	NDRICKS Circuit Court	Mary Jane Russell Gerk HER	VDRICKS Circuit Court
			- Carlina	
CONSENT OF PARENTS, PARENT OR	GUARDIAN	S. ANDREWS THE PERSONS	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 m	arriage. If only one parent
igns, state facts which render the consen-			signs, state facts which render the consent of the other parent u	innecessary
	- 1			
		The state of the s		
tate of Indiana.	1	The same of the last of the la	State of Indiana, HENDRICKS ss:	
ounty of HENDRICKS	\	7年十二十十十四十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十	County of	THE PLANE
Signed		Father	Signed	Father
Signed	THE RES	Mother	Signed	Mother
ubscribed and sworn to before me this		. 19	Subscribed and sworn to before me thisday of	, 19
w before me this	day of			Clerk
TV TV TO THE TOTAL THE TRANSPORT OF THE	The second of the second of the second			named nautice the
OMPLETE IF MARRIAGE LIC	CENSE ISSUED	BY ORDER OF COURT	A marriage license having been refused to the above	e named parties, the
MENDRICKS	_	Con	rt hy written order issued	and med
dul	authorizes	and directs the issuance of	a marriage needs to	
			AND MARRIAGE CERTIFICATE LIENIDDICKS	Circuit Court
Be It Remembered	there was filed in	my office a marriage licens	e issued by the clerk of the	
Indiana dated the	day of	Jino	e issued by the clerk of the	as mustana wha wije
CAR: = =====	A 44 A 44	an	decree and the second s	
e it further remembered, the follo	wing marriage cer	tificate was filed in my of	reby certify that on the 24day of	,
REV. DOUGLAS	A. OHIME	h	PLFD. County of	HEND.
asund nine him dead 1	01		Tale of	***************
ate of Indiana, Groom CARL	E. BARBROUG	GH	HENDRICKS County, State of	ENIDDICYS
d, Bride JUDY K. B.	ARTLEY	of	at surpose by the Clerk of the Circuit Court of	EINDRICKS
ere by me united in marriage as a	uthorized by a ma	rriage license issued for the	at purpose by the Clerk of the Circuit Court of	erin-
ated this 24	and the second s	19	and a cold of days	- Ordine

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

Official Designation.

HENDRICKS

Circuit Court

APPLICATION FOR MARRIAGE LICENSE

314 6-25-81 Date of Application

m Prescribed By iana State Board of APPLICATION FOR M	MARRIAGE LICENSE (2-25-8)
olth under Authority C. 31-1-3-2 HENDRICK	S County Date of Application
ective July 1, 1977	FEMALE 6-16-81
MALE 6-16-81	Medical Examination Report Dated 6-16-07
M. disal Examination Report Dated	Name of Physician Auch 6. Mally
Name of Physician Druce & Hearing	ever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT
LL QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed "False statement" U. QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed dollars (S500.000)".	FEMALE APPLICANT
LL QUESTIONS MUST BE ANSWERED. I.C. 31-131 (\$500.00)". all be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	Name First by Middle Lines on the
me First 4 2 Middle List	Day Year
Michael Day Year	Date of Birth July 17 1956
ate of Birth 1946	Place of Birth (State or Greign Juntry)
ace of Birth (State or foreign country)	Residence Address Street or R. R. Street or R. R. Street of R.
Street or R. R. 228 Xale & the Lantin & Ar., Indole, Hendy Sud.	Previous Marital Status: Never Married OR
envious Marital Status: Never Married OR	Morriage Ended By Death Divorce Annulment
Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate Judicial Decree
ate of birth verified by: Birth Certificate Judicial Decree	Other (Specify) Driveis livinge W/ gicture
Other (Specify) Arulis Sicense Wficture	Other (Specify) No D Yes No D Yes
Are you now or have you ever been adjudged to be of unsound mind?	If answer is "yes", has the adjudication been removed" No Yes
If answer is "yes", has the adjudication been removed?	2 Are you afflicted with a transmissible disease" No Yes
Are you afflicted with a transmissible disease? No D Yes D	3. Are you related to the male applicant closer than second cousin. Not Yes
Are you related to the female applicant closer than second cousin? No Visc Are you now under the influence of intoxicating liquor?	4 Are you now under the influence of intexacating liquer" No Yes No Yes
Are you now under the influence of a narcotic drug?	Are you now under the influence of a narrows. List the full names of any dependent children.
List the full names of any dependent children.	Canit Timmons 6 was
Lonni Sue dinn 15 chais	Desnifer Timornes 2 celas
Holly Jan Sinn // Leaus	(Nous not have least custody)
(dals not have custody)	Cooking or orders to support the shope
Are you required by any court order or orders to support the above	Are you required by any court order or orders to support the above how Ye dependent children."
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support	compliance with any court order or orders issued for their support
Full name of father Monovan bleved Sund	8 Full name of father the Machinisto Indiana
Residence of father (if deceased so state) Ulfflestal	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
Full maiden name of mother Loes Mag Juller	9. Full maiden name of mother The William Julian Ju
Residence of mother (if deceased so state) Olclased	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) JANISALL
State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana. HENDRICKS as: I depose and state the information given this application is true and corr
County of Management of Manage	County of 1
Signed A TAIL AS DO TO AS	Signed / Jake of the Da-Tenas
New Address 2228 2 R of the KANTER DR, Suggestion	Now Address 2228 Lake of the Conters
Subscribed and sworn to before me this 25 day of June 1957	Subscribed and sworn to before me this and day of June 115
Mary July Mussell Clerk HENDRICKS Circuit Court	Mary Jame Ressell Glerk HENDRICKS Circuit
V .	V CHARDIAN
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 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
	The second secon
	The state of the s
State of Indiana, HENDRICKS }ss:	State of Indiana.
County of	County of HENDRICKS
Signed	Signed
Signed Mother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 1
Clerk	
COMPLETE IE MARRIAGE LICENSE ISSUED DV ORDER OF THE	II a marking
HENDRICKS County	URT. A marriage license having been refused to the above named parties
inauthorizes and directs the issuance	Court by written order issued and
Be It Remembered, there was filed in my office a marriage l	NSE AND MARRIAGE CERTIFICATE icense issued by the clerk of the HENDRICKS Circuit
of Indiana dated the day of July	bushand and
one thousand nine hundred and 81	hereby certify that on the 4 day of July at 2228 Lake of the Lantern, County of Hendricks
State of Indiana, Groom Michael D. Linn	of Hendricks County of IN
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
Dated this 4 day of July , 19	91
, 19.	
	Signed Hoyt W. Perry Official Designation Pastor
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Pastor 7 day of July 19 81
	. 19

Signed Mary Jane Russell

.... Circuit Court

HENDRICKS

Form Prescribed By	
CARLES THE PARTY OF	
Health under Authority	
A 1 C 21 1 2 2	
Effective July 1 1977	

APPLICATION FOR MARRIAGE LICENSE

No	315
File	STATE OF THE PARTY OF

HENDRICKS File			
MALE / / // Cr	County June 25, 1981		
Medical Examination Report Dated 6-21-81	FEMALE Date of Application		
Name of Physician . Certin	Medical Examination Report Dated 6-21-81		
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician J. Werlin		
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation		
Name First 2 2 Middle			
Lonald to Variation	Name First Middle		
March 3 Jean	Date of Birth Month		
Place of Birth (Style or toroign country)	Place of Birth (State or foreign country)		
Residence Address Street or R. R. City C County / State	Basidence Address Street of P. P. Counts Ry		
RK" d vidion	City County State		
Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment O	Previous Marital Status: Never Married OR		
Date of birth verified by Birth Certificate Undicial Decree	Last Marriage Ended By: Death Divorce Annulment		
Date of some	Date of birth verified by: Birth Certificate Judicial Decree		
Other (Specify)	Other (Specify) Drives Lie W/ Pie.		
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	1. Are you now or have you give here all the same list and the sam		
If answer is "yes" has the adjudication been removed? No Ves 2 Are you afflicted with a transmissible disease?	If answer is "yee" hearth at the		
	2. Are you afflicted with a transmissible disease? No Yes \(\)		
3. Are you related to the fermale applicant closer than second cousin? No Yes 4. Are you now under the influence of intoxicating liquor? No Yes	3. Are you related to the male applicant closer than second cousin?		
5. Are you now under the influence of a narcotic drug? No Ves	4. Are you now under the influence of intoxicating liquor?		
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes No Yes		
	6. List the full names of any dependent children.		
7. Are you required by any court order or orders to support the above			
dependent children* No□ Yes□	7. Are you required by any court order or orders to support the above dependent children? No □ Yes □		
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in		
8. Full name of father Sorves Marion Novielson	compliance with any court order or orders issued for their support.		
	8. Full name of father William Jochson officers		
Residence of father (if deceased so state)	Residence of father (if deceased so state). Blooming long, Andlowa		
Birthplace of father (State or foreign country Violence	Birthplace of father (State or foreign country) Key		
9. Full maiden name of mother Marie Modys Kesper	9. Full maiden name of mother Maxie Mellon		
Residence of mother is deceased so state)	Residence of mother (if deceased so state) olecoased		
Birthplace of mother (State or foreign country) Analiana	Birthplace of mother (State or foreign country)		
State of Indiana.	State of Indiana. HENDRICKS Ses: I depose and state the information given in this application is true and correct.		
County of HENDRICKS in this application is true and correct.	County of		
Signed Danald F. Voulle	Signed Grene Brock		
New Address RR2 - Clayles	New Address R2 Clayton, In 160		
Subscribed and sworn to before me this 25 day of June 198/.	Subscribed and sworn to before me this 25 day of 198		
Mary Jone Mussell Gerk HENDRICKS Circuit Court	Mory Vone Rusself Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary		
State of Ledin	State of Indiana, HENDRICKS } ss:		
State of Indiana, County of HENDRICKS sa:	County of		
Pather	SignedFather		
Signed	SignedMother		
Signed Mother 10	Subscribed and sworn to before me thisday of, 19		
Subscribed and sworn to before me thisday of, 19	Clerk		
Clerk	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		
HENDRICKS County Co	T. A marriage license having been retused and filed ourt by written order issued and filed a marriage license to the above named parties.		
n directs the Issuance of	10		
THE REPORT OF THE PROPERTY OF	AND Million Circuit Court		
The The Draw of the state of the state of the a marriage the	the joining together as husband and wife		
Indiana data 1 11	D		
Be it further and F. Davidson artificate was filed in my o	ffice, to-wit: 3 day of July		
Stower W Pancon	rereby certify that on the		
me thousand nine by	at Clay County, State of IN		
State of Indiana Compound F. Davidson	Hendricks County, State of ,		
und, Bride Irene Brock	the Clark of the Circuit Court of HENDRICKS		
Be it further remembered, the following marriage certificate was filed in my on thousand nine hundred and State of Indiana, Groom Donald F. Davidson Irene Brock of Mere by me united in marriage as authorized by a marriage license issued for the county.	hat purpose by the Clerk of the		
and the marriage as authorized by	81 Panson		
Dated this 3 day of July , 19	Signed Stevan W. Randon Signed Minister Official Designation July ,19 81		
	Official Designation		

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

Mary Jane Russell
HENDRICKS

... Circuit Court

APPLICATION FOR MARRIAGE LICENSE

316

Form Prescribed By Indiana State Board of APPLICA	TION FOR M	ARRIAGE LICENSE	File 4	2
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS		Date o	of Application
MALE 9-25-9	R I	FEMALE Medical Examination Report I	Dated 6-25	18-6
Medical Examination Report Dated	3 (Name of Physician	wellast. P.	
Name of Physician O. M. Hod Say				representation or pro-
Name of Physician ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "I shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	false statement - Whoeve	PENAL!	E ADDITIONE	or pretens
shall be fined in any sum not exceeding five hundred. MALE APPLICANT		FEMAL	E APPLICANT Middle	
Name First Middle	Arress	Jean	Marie	Mulie
Date of Birth Month Day	Year	pate of Birth	8/	S
Place of Birth (State or foreign country)		Place of Birth (State or foreign country)	<i>i</i>	
Residence Address Street or R. R. City County	State	Residence Address Street or R. R		County State
14 South East Plfd.		Previous Marital Status: Never Married 0		and the same
Previous Marital Status: Never Married OR		Last Marriage Ended By: Death Divorce	Annulment	
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	☐ Judicial Decree	
		Other (Specify) Dhuse	W. sing die	Diet
A Other (Specify) Drivers Spin speat	No Yes 🗆	Are you now or have you ever been adjudged		No X Yes C
1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed?	No□ Yes□	If answer is "yes", has the adjudication been		No□ Yes□
Are you afflicted with a transmissible disease?	No → Yes □	2. Are you afflicted with a transmissible disease		No X Yes C
3. Are you related to the female applicant closer than second cousin?	No Yes	3. Are you related to the male applicant closer		No A Yes C
4. Are you now under the influence of intoxicating liquor?	No Yes O	 Are you now under the influence of intoxicat Are you now under the influence of a narcoti 		No Yes C
5. Are you now under the influence of a narcotic drug?6. List the full names of any dependent children.	No 9 Tes -	6. List the full names of any dependent children		NO 4 Yes L
6. List the full names of any dependent enforcem.		0		
Jane		Haura J.		
		Stephan		
		7. Are you required by any court order or order	es to support the share	
Are you required by any court order or orders to support the above dependent children?	No□ Yes□	dependent children?	s to support the above	No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory	y proof that you are in	If answer is "yes", it is required that this Appl	lication be accompanied by sat	isfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father Standard Coast.	10-	compliance with any court order or orders is	sued for their support.	
	Claren	8. Full name of father David	- 11 Carre	d
Residence of father (if deceased so state)		Residence of father (if deceased so state)	anapia. W	rg.
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	Orto	
9. Full maiden name of mother Elsa leath Mills	Call	9. Full maiden name of mother	A loggin	Done
Residence of mother (if deceased so state)		Residence of mother (if deceased so state)	tanusul	i Ohio
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country)	Olio	
State of Indiana, County of HENDRICKS Sa: I depose and state the in this application is	information given true and correct.	State of Indiana, County of HENDRICKS	ss: I depose and sta	ate the information given tion is true and correct.
Elman II D	2	county of		
Signed A Court	DE WANG	/\.//	an m. Mul	\sim
New Address 990/ MEDALLOW			1 Wedallion	
Subscribed and sworn to before me this day of day of		Subscribed and sworn to before me this		40
HENDRICKS	Circuit Court	Mary Jone Russ	QQ Clerk HENDI	RICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSERVE OF THE PROPERTY.		
We, the parents, of this applicant hereby give consent for this marriage. I	If only one parent	CONSENT OF PARENTS, PARENT OR		CONTRACTOR OF THE PARTY OF THE
signs, state facts which render the consent of the other parent unnecessar		We, the parents, of this applicant hereby		
	3	signs, state facts which render the consent	t of the other parent unn	ecessary
			***************************************	1

State of Indiana.			***************************************	***************************************
County of HENDRICKS ss:		State of Indiana,	\	
Signed		County of HENDRICKS	, 5 ***	
Signed		Signed		Father
	Mother	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 OR HENDRICKS County	DER OF COURT	A manuica II		the the
HENDRICKS County authorizes and dire	Cour	t by written order in the writ	efused to the above	named parties, the
in authorizes and dire	ects the issuance of	a marriage license to the shows name		and me
RETURN OF MAR	RIAGE LICENSE	AND MARRIAGE CERTIFICATE	ed parties.	
of Indiana dated the dated the day of day of day of day	a marriage license	issued by the clerk of the	HENDRICKS	Circuit Court
of Indiana dated theday ofday of	Langue & maybe	, 195 authorizing th	ne joining together a	s husband and wife
Be it further remembered, the following marriage certificate I, WARREN D. TODD	was filed in my of	JEAN M. MULV	EY	8 nasouna
I, WARREN D. TODD one thousand nine hundred and 81 State of Indiana Grant EDNARD	he he	rehy certify 11		
one thousand nine hundred and 81 State of Indiana, Groom EDWARD H. BESWICK and, Bride JEAN M. MULVEY	at	CUNOT	4 day of JUL	OWEN
Thursday, Croom Fillward Dagger				[] W D D
		THE TOND IN	Country State of	1 1
were by me united in marriage as authorized by a marriage la County. Dated this	icense issued for the	at purpose by the Clerk of the	County, State of	HENDRICKS
Dated this 29thday of JUNE	,, 81	the Circui	t Court of	
		Signed WARREN	D	· ·
Filed and recorded in accordance with the laws of the St.	Of	ficial Designation PAS'	TODD	***************************************
Filed and recorded in accordance with the laws of the State o	Indiana this	9th day of JULY		81
	~		************************************	

Signed MARY JANE RUSSELL
HENDRICKS

.. Circuit Court

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

No.____319 42

MILE	
MALE Medical Examination Report Dated 6-5-81	FEMALE Date of Application
Name of Physician Welliam James	Medical Examination Report Dated 6-5-8/
Name of the	Name of Division Report Dated 6-3-8/
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Welleam J. Joener
shall be fined in any sum MALE APPLICANTS	ever procures the issuance of a license to marry by any false statement
First Mills.	
Name Kobert a. Winks Last	Name First FEMALE APPLICANT
Date of Birth Day Year	Dono. Middle
Place of Birth (State or foreign country)	Date of Birth Month Day
7 101000	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Regident 13
The standard thousand thousand	10 Boy 213911 City County State
Previous Marital Status. Never Married O OR	Municipal Deverand Floring
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of hirth verified by:
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes No Yes	1 Are you now as b
If answer is "yes" has the adjudication been removed?	If answer is "voe" heads at a state of the s
2. Are you afflicted with a transmissible disease? No Yes -	2. Are you afflicted with a transition
3. Are you related to the female applicant closer than second cousin? No Yes D	3. Are you related to the male applicant of
4. Are you now under the influence of intoxicating liquor? No Yes D	4. Are you now under the influence
5. Are you now under the influence of a narcotic drug? No Ves D	5. Are you now under the influence of
6. List the full names of any dependent children.	6. List the full names of any dependent children.
	Charles and the second
7. Are you required by any court order or orders to support the above dependent children? No Ves V	7. Are you required by any court order or orders to support the above
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any spurt order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father fourt Ren Ricks, St.	compliance with any court order or orders issued for their support.
10=2 - 11. 01 11:101	A 2 in All Y is
Residence of father (if deceased so state) / TO / OLE NEWLY KO, WIND RELLES	Residence of father (if deceased so state) 755 / Centre Rd. Hounfull
Birthplace of father (State or foreign country) Dlougia	Birthplace of father (State or foreign country)
9. Full maiden name of mother Marjorie Atthley Grover	William of Them Pottichen
A A MARIE	9. Full maiden name of mother WWW OR VIII VELLY WAR
Residence of mother (if decreased so state)	Residence of mother (if deceased so state)
Birthplace of mother i State or foreign country L. Molgia	Birthplace of mother (State or foreign country) Shokana
State of Indiana.	State of Indiana,
County of HENDRICKS in this application is true and correct.	County of HENDRICKS 88: in this application is true and correct.
Some Make that I a	Signed Sevales a Association
200 E A & 2 2 1	New Address 0150 Tanbark Lane Ft. Lander
New Address 150 William of Out 15 Gardinal	25
Subscribed and sworn to before me this day of day of	Subscribed and sworn to before me this day of 19.8
Muy are Kussell Clerk HENDRICKS Circuit Court	Mary Jan Kusselberk HENDRICKS 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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts
	TO THE RESIDENCE OF THE PARTY O
State of Indiana,	State of Indiana, HENDRICKS ss:
County of HENDRICKS **:	Patter.
Signed	Signed
Makes Makes	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 COURT	The A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above mand filed urt by written order issued
HENDRICKS County Liperson Con	art by written order issued above named parties.
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
RETURN OF MARRIAGE LICENSE	se issued by the clerk of the the injury together as husband and wife
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of a	, 190/, authorizing the joining together
of Indiana dated the	d BEVERLY A. ROACH
Be it further ROBERT L. RICKS, JR.	fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of I,	ereby certify that on the County of HENDRICKS ,
I,	t. PLAINFIELD County, State of FLORIDA
State nine hundred and 81	BROWARD FLORIDA
and Paris Property and Paris Pro	BROWARD Court of HENDRICKS
State of Indiana, Groom ROBERT L. RICKS, JR. and, Bride BEVERLY A. ROACH were by me united in marriage as authorized by a marriage license issued for to County.	hat purpose by the Clerk of the Circuit Court of
County me united in marriage as authorized by a marriage to	
Dated this 27th day of JUNE, 19.81.	Signed WILLIAM R. CLAYTON
21th day of JUNE	Signed WILLIAM R. CLAYTON PASTOR JULY 19 81
Filed and recorded in accordance with the laws of the State of Indiana this	6+h day of JULY Clork
Filed and recorded in the State of Indiana this	MARY JANE RUSSELL CONT
The decordance with the laws of the State	Circuit Court

APPLICATION FOR MARRIAGE LICENSE

.. Circuit Court

HENDRICKS

Form Prescribed By ndiana State Board of APPLICAT dealth under Authority f I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	ARRIAGE LICENSE	File O-208	<u>1</u>
	Da)	FEMALE Medical Examination Repor	t Dated 6.3-81	
MALE Medical Examination Report Dated 6.23-	1	Name of Physician	uph Mamlin	
Name of Physician Months Must BE ANSWERED, LC, 31-1-3-6 prescribed "Fa	-langtatement - Whoever	procures the issuance of a license to m	arry by any false statement, representation of	or pretense
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "Fa shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	alse statement	FEMA	ALE APPLICANT	
MALE APPLICANT		Name First	Middle Mad	ast
Name First Middle Mar	ratt -	Date of Birth Month	Day Year	m
Date of Birth Month Day	955	Place of Birth (State or foreign country	y) 3 195	9
Place of Birth (State or foreign country)		Clamba	ng denn.	State
Residence Address Street or R. R. Cit County	State	Residence Address Street or R	Donnille Ind	State
RRIBXIVA, Donnelli, or		Previous Marital Status: Never Married) OR	
Previous Marital Status: Never Married OR		Last Marriage Ended By: Death Divol	rce Annulment	
ast Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certific		
& Other (Specify) Private Cicense W	Protus		es liènse w/put	ure
Other (Specify) Other (Specify	Note Yes -	1. Are you now or have you ever been adju-		No Yes C
If answer is "yes", has the adjudication been removed?	No Yes	If answer is "yes", has the adjudication b		No Yes C
2. Are you afflicted with a transmissible disease?	No Yes	 Are you afflicted with a transmissible di Are you related to the male applicant cle 		No Yes L
3. Are you related to the female applicant closer than second cousin?	No ¥ Yes□	 Are you related to the male applicant cold Are you now under the influence of into: 		No Yes
4. Are you now under the influence of intoxicating liquor?	No Yes U	5. Are you now under the influence of a na		No Yes C
5. Are you now under the influence of a narcotic drug? 5. List the full names of any dependent children.		6. List the full names of any dependent chi		
		angela Due	4 Padin	
		Diegory Ste	phen Mothin	
, , , , , , , , , , , , , , , , , , ,		7. Are you required by any court order or	orders to support the above	1
Are you required by any court order or orders to support the above dependent children?	No Yes	dependent children?	Application be accompanied by satisfactory proof t	No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory	y proof that you are in	If answer is "yes", it is required that this compliance with any court order or order		mat you are
compliance with any court order or orders issued for their support. Full name of father Balph Dale Me	this	8. Full name of father		ove
Residence of father (if deceased so state)	and.	Residence of father (if deceased so state)	Plainfield, D	nd.
		Birthplace of father (State or foreign cour	Pennsylvani	a
Birthplace of father (State or foreign country)	Rut Dedo o	-P	and I have	00,
9. Full maiden name of mother and a fault of Parisher of mother (if deceased so state) West likelie.	Const	9. Full maiden name of mother	S Link	and
Residence of mother (if deceased so state) Workleadlo, Or	62.	Residence of mother (if deceased so state)	Danger of	
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign countries of Indiana,	(mation give
State of Indiana, HENDRICKS Sa: I depose and state the in this application is	information given true and correct.	County of HENDRICKS	ss: I depose and state the inform	
1 Dann		a	Aborah Lee Marte	i
New Address DR, Box 199	DANVILLE	Signed	QR1 Box 149	Dan
Subscribed and sworn to before me this Subscribed and sworn to before me this	1801	Subscribed and sworn to before meth	26 to a Queno	19.5
Plany Jone Russell Clark HENDRICK	S	Mary Jane	LEGGE O CHARK HENDRICKS	Circuit Con
	Circuit Court	The pictor	Clerk	Official Cou
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 parent	We, the parents, of this applicant her	reby give consent for this marriage. If only	y one pare
signs, state facts which render the consent of the other parent unnecessa	ry		onsent of the other parent unnecessary	

State of Indiana, County of HENDRICKS ss:	- 1	State of Indiana, County of HENDRICKS	} ss:	
	-11	County of HENDRICKS		
	1	Signed		Fath
Signed		Signed		Mot
Subscribed and sworn to before me thisday of	, 19,	Subscribed and sworn to before me th	isday of	, 19
	Clerk			Cl
COMPLETE IF MARRIAGE LICENSE ISSUED BY OF	RDER OF COURT	1 A	1	antios 1
County	Con	and I		and fi
inauthorizes and dir	rects the issuance of	a marriage license to the		and
RETURN OF MA	PRIACE LICENIAN	Vers		
The state of the s	w multilline income	a record to the	HENIODIC V.	rcuit Co
of Indiana dated the 30 day of 3	LAND	, 198\ authorizi	ng the joining together as husband	d and w
De it further remembered the following	an	d. 1 10 12 10 1 11 1	Act.	
one thousand nine hundred and Sl State of Indiana, Groom Soy D. Marin and, Bride Descale . Marin	h	ereby certify that on the	day of July	2
State of Indiana, Groom Sox D. W.	a	t Camby	County of Hardis	CKX.
and, Bride Deborah Matin	0	Mendricks	County, State of	
and, Bride Deberal Martin were by me united in marriage as authorized by a marriage County.	of	Hendricks	County, State of 1	
were by me united in marriage as authorized by a marriage County.	ncense issued for t	hat purpose by the Clerk of the (Circuit Court of HENDRICK	(S
Dated this day of July	, 19.5			
		Signed James	Joshan G	
Filed and recorded in accordance with the laws of the State	of Indiana (Official Designation M	Her	
, State	-, maiana this	1/4: -1	195	

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No. 319

,	-	-	100
File			
	N. W.	A RATIO	
1000000		The same of the same	

	County6-25-81
MALE Medical Examination Report Dated 6-23-87	Date of Application
	FEMALE Medical Fuerication
Name of Physician U. M. Scudder	Medical Examination Report Dated 6-23-87
	Name of Physician a. n. Scudder,
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a liner
MALE APPLICANT	a incense to marry by any false statement, representation or pretense
Name W First P Middle O Last	Name FEMALE APPLICANT
Jarif see Chambles	Name of First Middle
Date of Birth Year	Date of Birth Month Deanene Edwards,
Place of Birth (State or foreign gountry)	Day, Year
Renia, Unio	Place of Birth (State or foreign country)
Residence Address Street of R. R. City County State	Residence Address Street or P. P. P.
10350 marchan frago mas, In	415 Janet Dr. Pols Dura Scounty State
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By Death Divorce Annulment Divorce	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by Birth Certificate Judicial Decree	Date of high world by Death Divorce Annulment
	Date of birth verified by: Birth Certificate Uddicial Decree
Other (Specify)	Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No D Yes D	
If answer is "yes", has the adjudication been removed? No 🗆 Yes 🗆	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes O	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes D	2. Are you afflicted with a transmissible disease? No Ves D
4. Are you now under the influence of intoxicating liquor? No Tayes	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
0. List tile tull mannes of any department of the control of the c	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above
	dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
ecompliance with any court order or orders issued for their support. 8. Full name of father RONALA ENGLISE Chambless	compliance with any court order or order issued for their support.
211	8. Full name of father Ared arnold Edwards
Residence of father (if deceased so state) Indiana	Residence of father (if deceased so state) Indiana
Phia	(Indiana)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Rathlew May Jewill	9. Full maiden name of mother Adria Thue Sigur
Residence of mother (if deceased so state) Indiana	Residence of mother (if deceased so state) Indiana
Residence of mother (If deceased so state)	\ ladia
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana.	State of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.
County of HENDRICKS 88: in this application is true and correct.	County of
Signed Sary Chambles	Signed X Resia Edwards
	New Address 6 358 maidsting Rd. ppt. 143
New Address 6368 March stone Rd Apt 143	New Address.
Subscribed and sworn to before me this 25th day of Juke 1921.	Subscribed and sworn to before me this 25 day of June, 1921.
Mary Jane Rusell Gerk HENDRICKS Circuit Court	Mary Jane Russell Clerk HENDRICKS Circuit Court
The first function of the 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 parent
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	We, the parents, of this applicant nevery services and the parents, of this applicant never services are the parents of the pa
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
The lates which render the consent of the same persons and the same persons and the same persons are the same persons and the same persons are the same pers	
	Caste of Indiana.
State of Indiana,	State of Indiana, HENDRICKS
County of HENDRICKS	County of
Father	Signed
Signed	Signed
Signed Mother	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me
Clark	
	having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the document and filed fourt by written order issued
HENDRICKS LICENSE ISSUED BY ORDER OF	ourt by written order issued
County	of a marriage license to the above named parties.
authorizes and directs the	TOTAL CE CERTIFICATE USAIDDICKS
Be It Remembered, there was filed in my office a marriage lice	E AND MARKETAGE Circuit Court
Be It Remembered there was filed in my office a marriage lice	nse issued by the authorizing the joining together as husband and wife
of Indiana dead at	Tocia Deanene Edwards
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the	and Lesia
Be it further remembered, the following marriage certificate was filed in my I, Rev. Dennis L. Dodson	office, to-wit. day of July day of July
1.	hereby certify that the Ch-rch County of Hendricks
0.1	Land Comment of the C
would nine handwad and	HEILUA - COMMISSION OF THE PROPERTY OF THE PRO
would nine handwad and	HEILUA - COMMISSION OF THE PROPERTY OF THE PRO
would nine hundred and	HEILUA
would nine hundred and	Hendricks County, State of IN HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS
State of Indiana, Groom Gary L. Chambliss and, Bride Lesia D. Edwards were by me united in marriage as authorized by a marriage license issued for	Hendricks County, State of IN HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS
State of Indiana, Groom Gary L. Chambliss and, Bride Lesia D. Edwards were by me united in marriage as authorized by a marriage license issued for County.	Hendricks County, State of IN Hendricks HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS L. Dennis L. Dodson
State of Indiana, Groom Gary L. Chambliss and, Bride Lesia D. Edwards were by me united in marriage as authorized by a marriage license issued for County.	Hendricks County, State of IN Hendricks HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS L. Dennis L. Dodson
State of Indiana, Groom Gary L. Chambliss and, Bride Lesia D. Edwards were by me united in marriage as authorized by a marriage license issued for County.	Hendricks County, State of IN Hendricks HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS L. Dennis L. Dodson
State of Indiana, Groom. Gary L. Chambliss and, BrideLesia D. Edwards were by me united in marriage as authorized by a marriage license issued for	Hendricks County, State of IN Hendricks HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS L. Dennis L. Dodson

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

FEMALE

320

Date of Application

(27 5/	FEMALE Medical Examination Report Dated 6-23-8/
MALE Medical Examination Report Dated Medical Examination Report Dated	Name of Physician 9. Baker
Name of Physician 9. Baker	Name of Thysical license to marry by any false statement, representation as
Name of Physician . Dollar	ver procures the issuance of a fitchis
shall be fined in any sum not exceeding 1110	Mills.
MALE APPLICANT Middle hast	Name Successore J. Dickon
Name Steven allen Stadiord	Date of Birth Month Day Year
Date of Birth Month Day 1851	Place of Birth (State or foreign country)
Place of Birth (State of foreign fountry)	Residence Address Street of R. City County State
Residence Address Street of R. R. City County State	Residence Address Box 3594 Inclientapolis, Ind.
RK# 18 120X 33 9 A grander age 2	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) Drivers Lie W/Pie
Other (Specify) Driver Sec W/Pec	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed? No Yes D
If answer is "yes", has the adjudication been removed? No Yes No Yes 2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? Now Yes
3 Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No Yes
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Yes No Yes
5. Are you now under the influence of a narcotic drug?	6. List the full names of any dependent children.
6. List the full names of any dependent children.	William Dovid Dickey 5
James D. Stoddard 8	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court, order oporders issued for their support
8. Full name of father Ord Stoddord	8. Full name of father Wesley 4. In Callin
Residence of father (if deceased so state) / Couls	Residence of father (if deceased so state) Brownslower, In
Birthplace of father (State or foreign country) Indiana	Birthplace of father (State or foreign fountry) Mich.
9. Full maiden name of mother Phillis Irone Chester	9. Full maiden name of mother Layce E. Motsinger
Residence of mother (if deceased so state) / routs, Indiana	Residence of mother (if deceased so state) Brownsburg, In
State of Indiana, I depose and state the information given	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
Signed Stewn ble Stodstories	Signed Jucinia & Duken
New Address RR18 Box 359H InAphs, In 46234	New Address R # 18 Box 3594 Julph
Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this. day of 19
HENDRICKS	HENIDBICKS
Clerk TIENDRICKS Circuit Court	Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS ss:	State of Indiana,
	County of HENDRICKS ss:
Signed Father	Signed Father
Signed	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of19
Clerk	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY CORDER	П
HENDRICKS County	RT. A marriage license having been refused to the above named parties, the
in	ourt by written order issued and filed
authorizes and directs the issuance	of a marriage license to the above named parties.
Be It Remembered, there was filed in my ffice a manifest	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of day of	SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Cour
be a further remembered, the following marriage certificate was filed in more	and LUCINDA J. DICKEY
JOHN C. MOWRER	
State of Indiana Groom STEVEN A STORDARD	RENDRICKS BROWN OF HENDRICKS
and, Bride. LUCINDA J. DICKEY	of HENDRICKS County, State of IN
were by me united in marriage as authorized by	OF HENDRICKS County, State of IN that The County of HENDRICKS County, State of IN County, State of IN
County.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of JULY 8	1
	Signed JOHN C. MOWRER
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation SUP. COURT 11 JUDGE 81
of the State of Indiana this	day of JULY 19

...day of JULY MARY JANE RUSSELL

... Circuit Court

HENDRICKS

Signed

APPLICATION FOR MARRIAGE LICENSE HENDRICKS

No		321
Em	11-	021

HENDRICKS

...Circuit Court

MALE Medical Examination Report Dated 6-23-81	Date of Application
Medical Examination Report Dated 6-23-81 Name of Physician Saugh R Back I.	FEMALE Medical Examination D
Name of Filysician Company	Medical Examination Report Dated 6-23-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement-shall be fined in any sum not exceeding five hundred dollars (\$500.00)"	Name of Physician Zarry R. Backle Whoever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	mover procures the issuance of a license to marry by any false statement, representation or pretense
Ames 6 11: yast	FEMALE ADD
Date of Birth Month Des Year	Middle A
Place of Birth (State or foreign country) 1959	Date of Birth Month Cenue Day
Residence Address Street or R. R. City County State A	Place of Birth (State or foreign country)
10225 Jule of Marches N. Dr. Straples, New D. Jun	Residence Address Street or R. R. Marama
Previous Marital Status: Never Married OR	1025 Kaking Lantonis N. Dr. Support Hund
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR
Date of birth verified by: A pirth Certificate - Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Division Date of birth verified by:
Other (Specify)	Date of birth verified by: A Birth Certificate Judicial Decree
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes Yes	Other (Specify)
If answer is "yes", has the adjudication been removed? No Yes 2. Are you afflicted with a transmissible disease?	If answer is "yes" has the adjudication be of unsound mind?
2. Are you afflicted with a transmissible disease? Note: Yes: Note: Yes:	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	No ☐ Yes ☐ If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
Full name of father World J. Vickery	compliance with any court order or orders issued for their support.
Residence of father (if deceased so state) 359 Plumb St., New Costlo	8. Full name of father Conrad & Hardesty
Birthplace of father (State or foreign country) Kentucky	Residence of father (if deceased so state) 10225 Rake of Santons No.
9. Full maiden name of mother Cathern M. Rall	Birthplace of father (State or foreign country)
As Mark	9. Full maiden name of mother Cerality Sue Richett
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Maliana.	Birthplace of mother (State or foreign country)
County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
Sol Jad James	
Signed A Signed	Signed Xarel Hardont
Subscribed and sworn to before me this 26 day of June 1981.	New Address 1025 Lake Lantehn W. Dr. In
MALE MAN HENDRICKS	Subscribed and sworn to before me this 26 day of HENDRICKS
Circuit Court	Mary Jan Ressell Clerk HENDRICKS 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 parent	
igns, state facts which render the consent of the other parent unnecessary.	we, the parents, of this applicant hereby give consent for this marriage. It only one parent signs, state facts which render the consent of the other parent unnecessary
Shot state rates which remark the consent of the	signs, state races which remains
county of HENDRICKS ss:	State of Indiana, HENDRICKS County of
	County of
Signed Father	Signed Father Signed Mother
Signed Mother	Signed
ubscribed and sworn to before me thisday of	Subscribed and sworn to before me this
Clerk	
OMDIETE IN MINERAL INTERIOR ISSUED BY ORDER OF COU	URT. A marriage license having been refused to the above named parties, the
HENDRICKS COURTE	Court by written order issued
authorizes and directs the issuance	of a marriage license to the above hames p
DETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court 19
Indiana dated the 30 day of June	ense issued by the clerk of the more than the joining together as husband and wife
4	.ana
it further remembered, the following marriage certificate was particularly	office, to-wit: hereby certify that on the
	County of
e thousand nine hundred and	
d Paid	County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS
ere by me united in the standard by a marriage license issued for	that purpose by the Clerk of the Circuit Court of
70	
ated this, 19,	
a real water to a market the	Official Designation, 19,
ed and recorded in accordance with the laws of the State of Indiana this	Official Designation , 19
To the the decordance with the two of	HENDRICKS Count Count

Form Prescribed By
Indiana State Board of
Health under Authority
of I.C. 31-1-3-2
Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 322
File 42
6-26-8/
Date of Application

... Circuit Court

HENDRICKS

	Medical Examination Report Dated 6-5-8/
MALE Medical Examination Report Dated G-5-8	Name of Physician acadio M. alarcon, J.
A YIA (1//a	Name of Physician 1990
The Average I C 31-1-3-6 prescribed "False statement - Whole	ever procures the issuance of a license to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding the number	FEMALE APPLICANT
MALE APPLICANT	Name Press
Name First Middle	Date of Birth Manth Day
Date of Birth Month Day	41Ne 1 1900
Place of Birth (State or foreign country)	Place of Birth (State or Greign country)
State State	Residence Address Street or R. R. Gty. Gounty State
Residence Address Street or R. R. Plainfield Nord. Onco.	628-A rakisino N., mingula , Nana, May.
	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify)
Other (Specify) ACCCCCC ACCCCCCCCCCCCCCCCCCCCCCCCCCCC	1. Are you now or have you ever been adjudged to be of unsound mind? No. Yes D
1. Are you now or have you ever been adjudged to be of disound mind.	If answer is "yes", has the adjudication been removed? No□ Yes□
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease? No. Yes D
2. Are you afflicted with a transmissible disease?	3. Are you related to the male applicant closer than second cousin? No. Yes [
3. Are you related to the female applicant closer than second cousin:	4. Are you now under the influence of intoxicating liquor? Not Yes D
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No. Yes	5. Are you now under the influence of a narcotic drug? No. Yes D
6. List the full names of any dependent children.	6. List the full names of any dependent children.
a mark	Michael Caines 10 years
· · · · ·	Sonothan Cames & Ware
	Character Charac
	musiophi ums 6 gais
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above dependent children? No□ Yes□
dependent children? No 1 1es 2 If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Solve Hall	8. Full name of father Wayne N. Laylor
Residence of father (if deceased so state) (2010 5. Fairful of Residence of father (if deceased so state) (2010 5.	Residence of father (if deceased so state 5145 Wars Rd. Inaple
10 Sidely	.0.2
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Elizabeth 12.	9. Full maiden name of mother 1000000 U. Valegori
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) (Malana)
State of Indiana,	State of Indiana, I depose and state the information given
County of HENDRICKS sa: I depose and state the internation given in this application is true and correct.	County of HENDRICKS \$ 88: in this application is true and correct.
signed termeth tee Sall	Signed Reflecta E. Carpen
New Address 628 A Sake Side Dr	New Address 63 8-A La Besid Xh.
Subscribed and sworn to before me this. Ob day of June 1957	
	Subscribed and sworn to before me this day of 1981
Many Jane Kuss D Clerk HENDRICKS Circuit Court	Many one Kuckel ark HENDRICKS Circuit Court
CONSTRUT OF PARENTS PARENT OF GUARDIAN	
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 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	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
SignedFather	Signed Father
Signed	Valor
Subscribed and sworn to before me thisday of, 19	Signed
	Subscribed and sworn to before me thisday of, 19
Clerk	Cleri
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLU	RT. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance of	of a marriage liganos to the state of the st
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the	SE AND MARRIAGE CERTIFICATE
of Indiana dated the day of	HENDRICKS Circuit Cour
Be it further remembered, the following marriage certificate was filed in my	nse issued by the clerk of the HENDRICKS Circuit Cour
The Control of the following marriage certificate was filed in my	office, to-wit:
State of Indiana Comments of the	at the real contract the real
and Bride Roll Sales	of Hardicks, County of The North
and, Bride & Decca & Carnes of were by me united in marriage as authorized by a marriage license issued for County.	Hendricks County, State of
were by me united in marriage as authorized by a marriage license issued for Dated this.	that purpose by the Clark of LENDRICKS
Dated this day of July 19	S HENDRICKS
, 19	Signed John C. Mowrer
Filed and manual 1	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Judge Sys 2
, this	day of

APPLICATION FOR MARRIAGE LICENSE 323 42 6-26-81 Date of Application HENDRICKS _County

MALE Medical Examination Report Dated 6-22-81	FEMALE Date of Application
A M	- WILLE
Name of Physician IV. E. IN Cliese.	Medical Examination Report Dated 6-22-8
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement, who	Name of Physician Th. E. McCleuce
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whose shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, representation
Name Middle	
Date of Birth Month Day	Name First O Middle
Place of Birth (State or foreign country)	Date of Birth Month Clegabeth White
Ser of on man	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Posido VIII A A A A k
Previous Marital Status: Never Married OR	IR Doy 2040 State
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
A	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Mulis Mapse W Rectore	Other(Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	Are you now or have you ever been adjudged to be of unsound mind? No. Yes
e Are you afflicted with a transmissible disease?	If answer is "yes" has the adjudication to
2 Are you related to the female applicant closer than second courses	2. Are you afflicted with a transmissible disease?
4. Are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug?	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	Are you now under the influence of a narcotic drug? No Yes No Yes
	, and the state of any dependent children.
7. Are you required by any court order or orders to support the above	The second secon
dependent children?	7. Are you required by any court order or orders to support the above dependent children? No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father 7000 6 6 1000 + 5000 +	compliance with any count order or orders jurged for their symport.
	8. Full name of father Newley J. White
1/	Residence of father (if deceased so state) 11/ Wal 204W, Fitts boro, Wild.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Mildeld Ca Voyce World	9. Full maiden name of mother Detty G. Whitney
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)
State of Indiana, Country of HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana, I depose and state the information given
County of HENDRICKS in this application is true and correct.	County of HENDRICKS in this application is true and correct.
Signed / (ark() ant	Signed Danini Clubite
New Address 11 Karman Dr. Canalle Um	New Address III Kaymar De Dixlo Un
Subscribed and sworn to before the this day of June 1981.	Subscribed and sworn to before me this day of June 195/
MALL DALL PLANTAL HENDRICKS	Mary Jane Keesell Gerk HENDRICKS Circuit Court
Clerk Clerk 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of Father
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
Clerk	
	A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS	A marriage license having been refused to the above named parties, the
County Suffer Cou	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license	e issued by the clerk of the
of Indian like It Remembered, there was filed in my office a man and	e issued by the clerk of the
of Indiana dated the 26 th day of an	d. TAMMIE ELIZABETH WHITE
Be it further new ARK ALLEN GANT contificate was filed in my off	ice, to-wit.
I,	County of HENDRICKS
one thousand nine hundred and 81 State of Indiana, Groom MARK A. GANT and, Bride TAMMIE E WHITE	TX HENDRICKS County, State of INDIANA
"Indiana, Groom MARK A. GANT	HENDRICKS
and, Bride TAMMIE E. WHITE were by me united in marriage as authorized by a marriage license issued for the County.	at purpose by the Clerk of the Circuit Court of
County, we united in marriage as authorized by a marriage license issued for the county.	REV. DONALD TYLER
Dated this 27th JUNE , 19	Signed MINISTER
ady of	ficial Designation JULY , 19 81
Filed and recorded in accordance with the laws of the State of Indiana this	6th day of JULY Clerk MARY JANE RUSSELL HENDRICKS Circuit Court
Cled	MARY JANE ROSSELL HENDRICKS Circuit Court

Signed.....

APPLICATION FOR MARRIAGE LICENSE

324 File_

Form Prescribed By	N FOR MA	RRIAGE LICENSE	File
ndiana State Board of APPLICATIO.	HENDRICKS	County	Date of Application
f I.C. 31-1-3-2 Effective July 1, 1977	HEIGURICIE		Pate of Application
Sheetite way is a second		FEMALE	Dated 6-22-81
MALE - 1 (2-22-8)		Medical Examination Report	Stayley
M. Harl Examination Report Dated	. 7	Name of Physician	af surrey
Name of Physician ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-typrescribed. False of the physician and exceeding five hundred dollars (\$5,00,00).	7	the issuance of a license to mar	re to any false statement, representation or pretens-
Name of Payson Dr ANSWERED, LC 31-1-3 typrescribed "False of	atement - Whoever	procures so	P ADDITIONT
shall be tined in any sum in			Middle 2 lost
MALE APPLICANT	last	Name First,	J. Martini
Name First Middle Serge	con -	Date of Birth Month	Day (Year
Date of Birth Month Day	1 //-	Place of Birth (State or foreign bountry)	1774
1/av, ag		4	THE !
Place of Birth (State or foreign country)	State	Residence Address Street or R.	13 11 Malayer State
Residence Address Street or R. R. Cary	h.	1.7	O.E.
33379 C.N. 71.		Previous Marital Status Never Married	B Annulment D
Previous Marital Status: Never Married OR		Last Marriage Ended By Death Divorce Date of birth verified by Birth Captificat	a D Justicial Decree
Last Marriage Ended By: Death Divorce Annulment Decree		Date of birth verified by Birth Contract	1.
Date of birth verified by: Birth Certificate Judicial Decree	7	Other (Specify)	· Deanse
Other (Specify) WA. Transles	7 0	I Are you now or have you ever been adjudg	red to be of unsound mind® No D Yes □
been adjudged to be of unsound mind?		If answer is 'yes' has the adjudication bee	en removed" No□ Yey□
and direction bean removed?	No D Yes D	2 Are you afflicted with a transmissible disc	No Tyes D
and the transmissible dispase?	No D Yes D	3. Are you related to the male applicant closs	er than second counts No Cl Yes D
3. Are you related to the female applicant closer than second cousin.	No O Yes O	4 Are you now under the influence of intoxic	cating liquor" No U Yes D
4. Are you now under the influence of intoxicating liquor?	No D Yes D	5 Are you now under the influence of a nare	outs drug" No D Yes D
5. Are you now under the influence of a narcotic drug?		6. List the full natures of any dependent child	(mare).
6. List the full names of any dependent children.		1.112sic 1/h	otin
Harrel Dergrom		and the state of t	
			1 14.42
7. Are you required by any court order or orders to support the above		Are you required by any court order or or	rders to support the above No D Yes D
dependent children?	No□ Yes□	dependent children"	Application be accompanied by satisfactory proof that you are in
If answer is "yes", it is required that this Application be accompanied by satisfactory proof	that you are in	compliance with any court order or order	
compliance with any court order or orders issued for their support		1/7	unn Hostman
8. Full name of father Colon Hinging		8 Full name of father	1) Jahren De
Residence of father (if deceased so state)		Residence of father (if deceased so state)	N.
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign count	of there.
Aladin Hickory		9 Full maiden name of mother	tous Williams
9. Full maiden name of mother X Lungs	7		R. Mahre , Su.
Residence of mother (if deceased so state)	7.	Residence of mother (if deceased so state).	W.I
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign noun	
State of Indiana, HENDRICKS Sa: I depose and state the info in this application is true	rmation given	State of Indiana.	as: I depose and state the information gives in this application is true and correct
County of HENDRICKS in this application is true		County of	non t
Signed Ronald Efferge se	~	Signed 7	agreery I had been story
New Address RR, 1 Box 72B,		New Address	1.BOX 72B
2/ (1991	Subscribed and sworp to before me this	26 ANY OR SHAPE 1921
Subscribed and sworn to before me this day of HENDRICKS		Thank h. W	HENDRICKS Circuit Cour
fland Clerk MENDRICKS	Circuit Court	I way give you	Pally Gerk
A DANIES DADRIES OR GUARDIAN		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 or			why give connent for this marriage. If only one paret
signs, state facts which render the consent of the other parent unnecessary		signs, state facts which render the co-	nsent of the other parent unnecessary
			The state of the s
	- A		
State of Indiana, HENDRICKS ss:		State of Indiana,	} ms:
County of		County of HENDRICKS	
Signed	Father	Signed	Fath
Signed	Mother	Signed	Moth
Subscribed and sworn to before me this day of			
uny of	19	Subscribed and sworn to before me the	is day of
	Clerk		Ch
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	ED OF COUR		and marries t
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDI HENDRICKS County	CR OF COUR	1. A marriage license having be	een refused to the above named parties
in authorizes and direct	Co	urt by written order issued	The state of the s
inauthorizes and direct			
RETURN OF MARR	IAGE LICENS	E AND MARRIAGE CERTIFICA	ATE
of the moties, there was filed in my office of	i marriage licer	ise issued by the alast at the	HENDRICKS Circuit Con
of Indiana dated theday of	Ling	, 19 S , authorizi	ng the joining together as husband and w
Donald E. Bergerson Be it further remembered, the following marriage certificate w			tin
I, Clifton Morris one thousand nine hundred and 81	***************************************	hereby certify that on the	4 day of July
one thousand nine hundred and 81 State of Indiana, Groom Donald E. Bergers and, Bride Fanny A Martin	on	at Indpis.	, County of Marion
and Bride Fanny & March		ofof	County, State of
were by me united in marriage as authorized by a marriage lic County.	ense issued for	that purpose by the Clerk of the (Circuit Court of HENDRICKS
Dated this day ofJuly	10 0	1	
	, 19		Morris
		Official Designation Minis	
Filed and manual in accordance in accordance		a cory mucion	The state of the s

7 day of July

Signed.....

Mary Jane Russell

Circuit Court

HENDRICKS

APPLICATION FOR MARRIAGE LICENSE

No	000	
		100
Dit.		

HENDRICK	
MALE	County
Medical Examination Report Dated 6-22-87	FEMALE Date of Application
Name of Physician Momas Monetts	Medical Examination Report Dated 6-22-87
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who	ever procures the issues ()
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Il issuance of a license to marry by any false statement, representation or pretense
Name First 00 Middle Last	FEMALE APPLICANT
Date of Birth Month Day Your Prescal	Name Effect Middle Lost
/2 15 in 1911 2	Date of Birth Month Day
Place of Birth (State or Greign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	1 L alVIII a V I
238 Enderly ave & Blurg Hend Ind.	Residence Address Street or R. R. City County & State
Previous Marital Status. Never Married OR	manage for Sports Her Merior and
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers Linens	Judicial Decree
	Other (Specify) Vrivers dicense
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes I If answer is "yes", has the adjudication been removed? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No D Yes	If answer is "yes", has the adjudication been removed? No □ Yes □
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease? No Yes O
4. Are you now under the influence of intoxicating liquor? No 2 yes 2	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor? No Yes 1
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes 6. List the full names of any dependent children.
Leolie & Kressel	and dependent entitren.
Momas Raymond Kressel	
Comment of the contract	
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court orders or orders issued for their syppory	compliance with any court order or orders issued for their support.
8. Full name of father Raymond V. Fresgel Sr.	8. Full name of father Richard C. Elliotte
Residence of father (if deceased so state) Frankfort Incl.	Residence of father (if deceased so state) Irefalder Sol.
Birthplace of father (State or foreign country) Frankfort Ind	A
Por O Mais M	Birthplace of father (State or foreign country)
9. Full maiden name of mother 100 accord 110 110 110 110 110 110 110 110 110 11	9. Full maiden name of mother. Sury 1. Full 5
Residence of mother (if deceased so state) Transfort Sug.	Residence of mother (if deceased so state) Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Frankfort Inc.	Birthplace of mother (State or foreign country).
State of Indiana. HENDRICKS sa: I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
County of HENDRICKS in this application is true and correct.	County of
Signed X Chroll A. Gussel	Signed Haren'S Meale
New Address 103 PIN OAK BROWNSBURG, IN 46112	New Address 103 PIN OAK BROWN Shurg IN 46
og lune 81	Subscribed and sworn to before me this 9 day of force 187.
Man Part of Land of La	Mary Sano Russell Glerk HENDRICKS Circuit Court
Circuit Court	- July for Ciera
	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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which fender the
	State of Indiana, State of Ind
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
out of the same of	SignedFather
Signed	Signed
Signed Mother	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of19	Subscribed and sworn to before me this
Clerk	
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 COUR	and filed ourt by written order issued
HENDRICKS County County	of a marriage license to the above named parties.
- WARRIAGE LICENS	E AND MARRIAGE CERTIFICATION Circuit Court
of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of I,	. X- S. Meadl
Server a Server	office, to-wit:
Be it further remembered, the following marriage certificate was filed in my of	hereby certify that on the day of Revelight
James Chlandle	at Daville County of Suday
one thousand nine hundred and State of Indiana, Groom Company of the state of State of Indiana, Groom Company of the state of Indiana, Groom Company	of Handrake County, State of Judiana
State of Indiana, Groom Cossella C. Sellal	Mendricks Hendricks
State of Indiana, Groom of and and solution of and, Bride of united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court of
Can be united in marriage as authorized by a marriage	. 500. 0.
County.	ance Chillian

Official Designation ...

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

HENDRICKS

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

6-29-87 Date of Application

	FEMALE Medical Examination Report Dated 6-23-87
MALE Medical Examination Report Dated 6-23-8	(-1/2
	Name of Physician
Traine of Thy	ever procures the issuance of a license to marry by any false statement, representation or pretense
shall be fined in any sum not exceeding the	FEMALE APPLICANT
MALE APPLICANT White A Middle	Name First Blast
Name Longed L. Vage	Date of Birth Month Day Year
Date of Birth Month 1932	Place of Birth (State or foreign country)
Place of Birth (State or oreign country)	Residence Address Street y R. R. City County Staty
Residence Address	521 S. Jefferson Brownsburg Hand Ind
Residence Address 70 Street or R. R. Brownsburg Abnot 20	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Judicial Decree
	Druero License
Other (Specify) Drues Licenso	1. Are you now or have you ever been adjudged to be of unsound mind" No Yes D
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication been removed" No Ves C
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	2 Are you afflicted with a transmissible disease" No Yes O
2. Are you afflicted with a transmissible disease. 3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin" No Wyes O
4 Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intexicating liquer" No Yes D No Yes D
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug. No Yes D 6. List the full names of any dependent children.
6. List the full names of any dependent children.	Kimberly Sue Brown
David Wesley Warten	I that (Brown)
	Jarry Robert Divak
	David del Grown
7. Are you required by any court order or orders to support the above	7 Are you required by any court order or orders to support the above dependent children? No Yes D
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court of der or orders issued for their support.	compliance with any court under or orders issued to their support
8. Full name of father Hourt Marlen	8. Full name of father Gagar Pascoe Suitiful
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign couptry) Untrouve	Birthplace of father (State or foreign country) Parget Kentucky
9. Full maiden name of mother Sullian Wilson	9. Full maiden name of mother. Ulina Sue Leingst
No as a second	Residence of mother (if deceased so state) Danuelle Incl.
Residence of mother (if deceased so state)	Box wi Blue Historia
Birthplace of mother (State or foreign country) State of Indiana, I denote and state the information given	State of Indiana.
County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	County of HENDRICKS in this application is true and correct.
Signed & Donald L. Martin	X Latricia L. Brown
New Address 5410 18901 & Browns burg	New Addres 5410 N. 901E - Brownsburg N
Subscribed and sworn to before me this 29 day of June 187.	29
Mary hard Burnell HENDRICKS	Subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this
Circuit Court	/ Wy Will Accept Clerk Picholos 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 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	signs, state facts which render the consent of the other parent unnecessary
	signs, state facts which render the consent of the other parent unincommant
State of Indiana, HENDRICKS ss:	State of Indiana,
County of	County of HENDRICKS \ nn:
	County of TILINDRICKS
Signed. Father	Signed Father
Signed Mother	Signed Father
	Signed Father Signed Mother
Signed Mother	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Mother Subscribed and sworn to before me this day of 19 Clerk	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU HENDRICKS County	Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU HENDRICKS County (in authorizes and directs the issuance)	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU HENDRICKS County (19	Signed Signed Mother Subscribed and sworn to before me this day of 19
Signed	Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed	Signed Mother Subscribed and sworn to before me this day of Cler. 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 Cour., 19 81, authorizing the joining together as husband and wife
Signed	Signed Signed Subscribed and sworn to before me this Court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the 19 19 19 19 19 19 19 19 19 1
Signed	Signed Signed Subscribed and sworn to before me this Court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the 19 19 19 19 19 19 19 19 19 1
Signed	Signed Signed Subscribed and sworn to before me this Subscribed and sworn to before me this Court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the 19 19 10 11 11 11 11 11 11 11
Signed	Signed Signed Subscribed and sworn to before me this Subscribed and sworn to before me this Clerical Court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the 19 19 10 11 11 11 11 11 11 11
Signed	Signed Father Subscribed and sworn to before me this day of 19
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU HENDRICKS County In authorizes and directs the issuance RETURN OF MARRIAGE LICEN authorizes and directs the issuance of Indiana dated the 6 day of JULY DONALD L. MARTIN Be it further remembered, the following marriage certificate was filed in my I, GEORGE DAVIS one thousand nine hundred and 81 State of Indiana, Groom DONALD MARTIM and, Bride PATRICIA L. BROVII of were by me united in marriage as authorized by a marriage license issued to the subscript of the subs	Signed Signed Subscribed and sworn to before me this Subscribed and sworn to before me this Court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the 19 81, authorizing the joining together as husband and wife and PATRICIA L. BROWN office, to-wit: hereby certify that on the 11 day of JULY at BROWNSBURG County of HENDRICKS County of IN County, State of IN County, State of IN
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU HENDRICKS County In authorizes and directs the issuance RETURN OF MARRIAGE LICEN There was filed in my office a marriage lice of Indiana dated the 6 day of JULY DONALD L. MARTIN Be it further remembered, the following marriage certificate was filed in my I, GEORGE DAVIS one thousand nine hundred and 81 State of Indiana, Groom DONALD MARTIN AND AND AND AND AND AND AND AND AND AN	Signed Father Signed Mother Subscribed and sworn to before me this day of 19. Clerical 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 Cour. 19 81, authorizing the joining together as husband and wife and PATRICIA L. BROWN office, to-wit: hereby certify that on the 11 day of JULY BROWNSBURG County of HENDRICKS OF HENDRICKS County, State of IN County, State of IN County, State of IN County, State of IN
Signed	Signed Signed Signed Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the 19 81, authorizing the joining together as husband and wife and PATRICIA L. BROWN office, to-wit: hereby certify that on the 11 day of BROWINSBURG County of HENDRICKS HENDRICKS HENDRICKS County, State of The County, State of The County, State of The County of HENDRICKS RI That purpose by the Clerk of the Circuit Court of HENDRICKS 81
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 LICEN Authorizes and directs the issuance of Indiana dated the 6 day of JULY DONALD L. MARTIN Be it further remembered, the following marriage certificate was filed in my GEORGE DAVIS one thousand nine hundred and 81 State of Indiana, Groom DONALD MARTIN and, Bride PATRICIA L. BROWN of MARTIN DATRICIA L. BROWN of MARTIN DATRICA L. BRO	Signed Signed Subscribed and sworn to before me this Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the And PATRICIA L. BROWN office, to-wit: hereby certify that on the BROWNSBURG OF HENDRICKS County of County of County, State of HENDRICKS RIN That purpose by the Clerk of the Circuit Court of Signed GEORGE DAVIS
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 LICEN Authorizes and directs the issuance of Indiana dated the 6 day of JULY DONALD L. MARTIN Be it further remembered, the following marriage certificate was filed in my GEORGE DAVIS one thousand nine hundred and 81 State of Indiana, Groom DONALD MARTIN and, Bride PATRICIA L. BROWN of MARTIN DATRICIA L. BROWN of MARTIN DATRICA L. BRO	Signed Signed Signed Signed Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the 19 81, authorizing the joining together as husband and wife and PATRICIA L. BROWN office, to-wit: hereby certify that on the BROWINSBURG of HENDRICKS HENDRICKS HENDRICKS County of County, State of IN County, State of IN r that purpose by the Clerk of the Circuit Court of Signed GEORGE DAVIS Official Designation MINISTER 14 day of JULY 19 81.
Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU HENDRICKS County In authorizes and directs the issuance RETURN OF MARRIAGE LICEN The subscribed in my office a marriage lice of Indiana dated the 6 day of JULY DONALD L. MARTIN Be it further remembered, the following marriage certificate was filed in my I, GEORGE DAVIS one thousand nine hundred and 81 State of Indiana, Groom DONALD MARTIN AND ARTICLA L. BROVII Of were by me united in marriage as authorized by a marriage license issued to the subscribed in marriage as authorized by a marriage license issued to the subscribed in marriage as authorized by a marriage license issued to the subscribed in	Signed Signed Subscribed and sworn to before me this Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the And PATRICIA L. BROWN office, to-wit: hereby certify that on the BROWNSBURG OF HENDRICKS County of County of County, State of HENDRICKS RI County, State of HENDRICKS Signed GEORGE DAVIS

APPLICATION FOR MARRIAGE LICENSE 327 of I.C. 31-1-3-2 Effective July 1, 1977 HENDRICKS County 6-30-8 6-23-81 Date of Application Medical Examination Report Dated. FEMALE Medical Examination Report Dated_ 6-23-81 ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT Previous Marital Status. Never Married KOR Previous Marital Status: Never Married X OR Last Marriage Ended By Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Date of birth verified by Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate

Judicial Decree Other (Specify)_ Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is "yes", has the adjudication been removed! No Yes If answer is "yes", has the adjudication been removed Are you afflicted with a transmissible disease No T Yes No Yes 2. Are you afflicted with a transmissible disease Are you related to the female applicant closer than second cousin? No Yes No Yes O 3. Are you related to the male applicant closer than see Are you now under the influence of intoxicating liquor? No Yes No Yes you now under the influence of intoxicating liquor No Yes D Are you now under the influence of a narcotic drug? 5. Are you now under the influence of a narcotic drug? 6 List the full names of any dependent children No Yes 6. List the full names of any dependent children Are you required by any court order or orders to support the above dependent children 7. Are you required by any court order or orders to support the above No T Yes No O Yes O If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in 8. Full name of father Kollent Woodle Residence of father (if deceased so state) Kennengton, Maryford Birthplace of father (State or foreign country) Tucaraqua 9. Full maiden name of mother Dolores Mary Michel Residence of mother (if deceased so state) Spungfield State of Indiana, HENDRICKS State of Indiana. I depose and state the information given in this application is true and correct. HENDRICKS New Address 1310 Le Mans Ct #104, Indpls IN 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 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana. HENDRICKS ..Father Mother 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..... HENDRICKS ..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. ..., authorizing the joining together as husband and wife JUDITH A. BISHOP 7 Be it further remembered, the following marriage certificate was filed in my office, to-wit: WILLIAM R. SUTTON hereby certify that on the 11 _____day of ____JULY__ at XMENDRXEKS DANVILLE , County of HENDRICKS EARL T. BONHAM one thousand nine hundred and 81 County, State of ... MARION of HENDRICKS County, State of IN WILLIAM R. SUTTON 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. EARL T. BONHAM .day of JULY Signed..... Dated this. Official Designation PASTOR

.....day ofJULY

Signed ..

.Clerk

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

(0	- 3	0	.8	1
Date	of A	ppl	icatio	n

1 01 80	Medical Examination Report Dated 6-25-8
MALE Medical Examination Report Dated (0-26-8) Report Dated (3-26-8)	Name of Physician Glenna. Ballengee
	resources the issuance of a license to marry to any false statement, representation or pretensi-
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whose	over 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 Fig. 1 Middle Jast
Name First Middle Routell	Date of Birth Month Day Year
Date of Birth Month Day	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Chre Haustond.
Peridence Address Street or R. R. City County State	Residence Address Box 123 B Indias Renal Stal
5 18 130X 133 B 2 water 18 w	Previous Marital Status Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By Death Divorce Annulment D
Last Marriage Ended By: Death Divorce Annulment Dute of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by Birth Certificate Dudicial Decree
Other (Specify) Drives License	Other (Specify) Drivers Learning
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	1 Are you now or have you ever been adjudged to be of unsound mind? No Yes O
If answer is "yes", has the adjudication been removed?	If answer is "yes" has the adjudication been removed. No Yes O 2. Are you afflicted with a transmissible disease. No Yes O
2. Are you afflicted with a transmissible disease?	2 Are you afflicted with a transmission of the second cousin. No Yes D
3. Are you related to the female applicant closer than second cousin.	4 Are you now under the influence of intexcenting liquor' No Pyes D
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes	5. Are you now under the influence of a naroutic drug" No Tes D
6. List the full names of any dependent children.	6 List the full names of any dependent children
	Justin Cory Poppe
7. Are you required by any court order or orders to support the above dependent children? No □ Yes □	7 Are you required by any court order or orders to support the above dependent children" No Yes D
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father Andrews Badwell	compliance with any court order or orders assued for their support.
	2 d al Smal
Residence of father (if deceased so state)	Residence of father (if deceased se state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign positry)
9. Full maiden name of mother Rosemaky hopenson	9. Full maiden name of mother
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country). State of Indians.
State of Indiana. County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indians. County of HENDRICKS State of Indians. I depose and state the information given in this application is true and correct.
Signed KMark Badwell	V DAGE POOR
New Address R 18 Box 123 B THOPLS	PAIR BOX 123 B INDPL
Subscribed and sworn to before me this. So day of Jens , 13.	Subscribed and sworn to before me this 30 day of June 19.8.
Mary John Rhenbricks Circuit Court	Ma Per Da Ma Presso Q Que HENDRICKS Circuit Court
	and but
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 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	signs, state facts which render the consent of the other parent unnecessary
	The second secon
State of Indiana, HENDRICKS 88:	State of Indiana,
County of	County of HENDRICKS
Signed. Father	Signed Father
Signed	Signed Mother
Subscribed and sworn to before me thisday of 19	Subscribed and sworn to before me this day 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
County County	ourt by written order in and filed
authorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MADDIAGE LIGHT	7.80
of Indiana dated the	ense issued by the clerk of the HENDRICKS Circuit Court
Mark A. Bedwell	nse issued by the clerk of the HENDRICKS Circuit Court 19 81, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in many	and RODIN A. Poppe
Dating the state of the state o	hereby certify that on the
State of Indiana, Groom Mark A. Bedwell	at Brownsburg , County of IN Hendrick of Hendricks
and, Bride Robin A. Poppe	Hendricks County, State of TN
were by me united in marriage as authorized by a marriage license issued to	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of July	81
, 19	Signed Charles G. Burnside
Filed and recorded in accordance in the secondary	
Filed and recorded in accordance with the laws of the State of Indiana this	7 day of July 81

.day of

July Mary Jane Russell

... Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No. 329 4/2

... Circuit Court

MALE Medical Examination Report Dated	6-25-81
Name of Physician Wm. Q	
LL QUESTIONS MUST BE ANSWERED, LA	C. 31-1-3-6 prescribed "False statement—V

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

County 7-/-8/
Date of Application FEMALE Medical Examination Report Dated 6-25-81

TO DEPOSITIONS MUST BE ANSWERED TO 21 1 22	Name of Physician Wm. a. Edwards
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT	ever procures the issuance of a limit
MALE APPLICANT	n issuance of a license to marry by any false statement, representation or pretense
Name Middle	FEMALE APPLICANT
Lary S. WOOD	Name First Middle
Date of Birth Day Year	Date of Birth Month Marie allen
Place of Birth (State or foreign equation)	Day Year
Residence Address Street or R. R. Ciffornia	Place of Birth (State or Oreign equintry)
R4 BOX 268, Claraton In a State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	BOX 17, amo Inal. 46/03
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	Junicial Decree
the your naw as have you ever been adjudged to be of uncound minds	Other(Specify)
Honoros is "ves" has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
Source of the standard of the second of the	If answer is "yes", has the adjudication been removed?
	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No Yes	3. Are you related to the male applicant closer than second cousin?
4 Are you now under the influence of intoxicating liquor? No. Yes	4. Are you now under the influence of intoxicating liquor?
5. Are you now under the influence of a narcotic drug? No Yes D	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No□ Yes□	dependent children? No Pes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support
8 Full name of father Jany Edward Wood	8. Full name of father Donald W. Ullen
Residence of father (if deceased so state) Clayton, Ind.	Residence of father (if deceased so state) amo, Snd.
Birthplace of father (State or foreign country) Indiana	Wa trake
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Heatucky
9. Full maiden name of mother Clana House Hill	9. Full maiden name of mother Mayoul Sharleno Pauson
Residence of mother (if deceased so state) Clauton, 8,8.	Residence of mother (if deceased so state) Comb, Incl.
	0'1'
Birthplace of mother i State or foreign country) Williamo	Birthplace of mother (State or foreign country)
State of Indiana. HENDRICKS I depose and state the information given in this application is true and correct.	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
County of	County of.
Signed Lary K, Work	Signed are Marie aller
DP4 BOX 214 Plan TN YELK	New Address RR 4 Box 268 Clayton In 46118
- 1	1 1 21
Subscribed and swan to before me this day of July 196/.	
May Jane Russellark HENDRICKS U Circuit Court	May Come Russell Clerk HENDRICKS Greuit 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 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
signs, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other
	State of Indiana, HENDRICKS
State of Indiana. Country of HENDRICKS 881	County of
county of	Signed Father
Signed Father	Mother
Signed Mother	Signed
Signed 19	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this	Clerk
Clerk	All the state of t
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 COUR	ourt by written order issued
HENDRICKS County County	Surveyinge license to the above named parties.
disperse the issuance	of a marriage license to the
OF MARRIAGE LICENS	SE AND MARKIAGE CERTIFICATION HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licer	nse issued by the clerk of the
Be It Remembered, there was filed in my opinion	nse issued by the clerk of the
of Indiana dated the land day of	And Hilen
Consul Dood	attice to-wit.
Be it further remembered, the following marriage certificate was filed in my of the state of the	hereby certify that on the any of the male
1, John Parsons	at north view Christian Church County of the
Be it further remembered, the following marriage certificate was filed in my of the following marriage	1 Hendricks County, State of 1
one thousand nine hundred and S State of Indiana, Groom Cary Dool and, Bride	Herdicks County, State of 10
state of Indiana, Groom Cary Dool and, Bride And Allen of were by me united in marriage as authorized by a marriage license issued for County.	he the Clerk of the Circuit Court of HENDRICKS
bride license issued for	that purpose of the citra of
or by me united in marriage as authorized by	a Postens
Dated this 11 Tuly 1981	Signed John S
County. Dated this Marriage as authorized Tuly 1981	Official Designation Elder 1951
	Ojita

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE 7-2-8)
Date of Application

Form Prescribed By Indiana State Board of APPLICATIO	N FOR MA	ARRIAGE LICENSE	File	42
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICKS	County	Dat	- 2 - 8) e of Application
	81	FEMALE Medical Examination Rep	ort Dated June	25,1981
MALE Medical Examination Report Dated Name of Physician Name of Physician	2	Name of Physician,	marry by any false statemen	nt, representation or prote
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False st	tatement—Whoeve	r procures the Issuance in a list of	ALLE ADDITIONS	or preten
Shall be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT		FE	MALE APPLICANT Middle	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Last	Name	Q.	Dyer
Date of Birth Month Day Year		Date of Birth Month	4	1961
Place of Birth (State or fpreign county)		Place of Birth (State of foreign coun	o Inol.	
County, County	1	Residence Address Street or	of B Burg	Hend State
1319 M. GROD Que Inaple Mario	mol:	Previous Marital Status: Never Married	OR	
Previous Marital Status: Never Married OR		Last Marriage Ended By: Death Di	vorce Annulment	
Last Marriage Ended By: Death Divorce Annulment Duvorce Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Cert	ificate Judicial Decree	
		Other (Specify)		
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes 🗆	1. Are you now or have you ever been ad		No Pyes
If answer is "ves", has the adjudication been removed?	No Ves -	If answer is "yes", has the adjudication		No□ Yes
2. Are you afflicted with a transmissible disease:	No Yes O	 Are you afflicted with a transmissible Are you related to the male applicant 		No D Yes
3. Are you related to the female applicant closer than second cousin.	No Yes D	4. Are you now under the influence of in		No B Yes
4. Are you now under the influence of intoxicating liquor:	No Yes	5. Are you now under the influence of a	narcotic drug?	No Ye
List the full names of any dependent children.	-	6. List the full names of any dependent of	children.	
		7. Are you required by any court order of	or orders to support the shove	
dependent cinidren.	No□ Yes□	dependent children?		No□ Ye
If answer is "yes", it is required that this Application be accompanied by satisfactory proof t	that you are in	If answer is "yes", it is required that the		y satisfactory proof that you a
compliance with any court order or orders issued for their support. Full name of father with a court order or orders is sued for their support.		compliance with any court order or or or 8. Full name of father	mes Buy	yer
Residence of father (if deceased so state) Shelbywill, and		Residence of father (if deceased so state	Browns	Burg Ind.
Birthplace of father (State or foreign country) Indiana,	-	Birthplace of father (State or foreign co		
Full maiden name of mother Martha a. Keel		9. Full maiden name of mother	13-6	an Brewer
Residence of mother (if deceased so state) Shelbywill, and.			Browns	spura Ind
Birthplace of mother (State or foreign country)		Residence of mother (if deceased so stat	hali	200
State of Indiana, I denose and state the inform	nation given	Birthplace of mother (State or foreign c State of Indiana,) I denose an	d state the information gi
County of HENDRICKS in this application is true a	and correct.	County of HENDRICKS		lication is true and corr
Signed X Paul D W. Lite	·····	Signed.	Dione 8	- Oyer
New Address 1319 N. Droff ave.		New Address	1319 N G	off Ale
Subscribed and sworn to before me this day of day of	. 190	Subscribed and sworn to before me t	his day of	July 198
11 Duy Jane Puble Qk HENDRICKS C	Circuit Court	Mary Jano	Kussell HE	NDRICKS Circuit C
CONSENT OF PARENTS, PARENT OR GUARDIAN		000		
Ve, the parents, of this applicant hereby give consent for this marriage. If only		CONSENT OF PARENTS, PAREN		
igns, state facts which render the consent of the other parent unnecessary		We, the parents, of this applicant h		
		signs, state facts which render the		
State of Indiana, HENDRICKS ss:		State of Indiana,		
outing of the state of the stat		County of HENDRICKS	ss:	
Signed		Signed		Fa
Signed	Mother		***************************************	
subscribed and sworn to before me this	, 19	Subscribed and sworn to before me t		
	Clerk			
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County	OF COURT.			
HENDRICKS County authorizes and directs to	Cour	t by written order issued	peen refused to the ab	ove named parties, and f
directs ()	ne issuance of	a marriage license to the above	e named narties	
Be It Remembered there was fled:	GE LICENSE	AND MARRIAGE CERTIFIC	TATE	
of Indiana dated the	la raige mense	issued by the clerk of the	HENDRICKS	Circuit Co
of Indiana dated the		, 19, authoriz	ing the joining togeth	er as husband and i
,	filed in my offi	ce, to-wit:	R	***************************************
me thousand nine hundred and 81	he	reby certify that on the	18 day of JUI	Y
State of Indiana, Groom. PAUL D. WHITE		M	County	RION
nd, Bride	of	HENDRICKS	County, State of	IN
County.	e issued for the	at muse	County, State of	IN
Dated this	01	are purpose by the Clerk of the	Circuit Court of	HENDRICKS
		Signed	E. DAFOR	a party
Filed and recorded in accordance with the laws of the State of Ind	01	fficial Designation PAS	ETOR DAFOR	
the State of Ind	arana this	21 day of JI	JLY	10 81

.....day of JULY MARY JANE RUSSELL

.... Circuit Court

HENDRICKS

Signed ...

.Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	331	
		•

HENDRICK	S File 12
MALE	
Medical Examination Report Dated 6-18-81	FEMALE Date of Application
Name of Physician Drownell	Medical Examination Report Dated 6-18-8
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoshall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Drawnals
shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement
Pinet	
Jane Diast Diast	Name First First
Date of Birth Month Day Year	Date of Birth Month Marie School and the B
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. City County State	(Chicountry)
RI, Dallay Marrows Wed	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married OR	philippy are. Tild. Old.
ast Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by. Therein Certificate - Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify)	
Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify)
If answer is "yes", has the adjudication been removed? No O Yes O	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes No Yes
Are you afflicted with a transmissible disease? No 🖰 Yes 🗆	2. Are you afflicted with a transmissible disease? No Yes
Are you related to the female applicant closer than second cousin? No Yes No Yes	3. Are you related to the male applicant closer than second cousin? No ♥ Yes □
Are you now under the influence of intoxicating liquor? No Yes	4. Are you now under the influence of intoxicating liquor?
S. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes
None	6. List the full names of any dependent children.
	- Mare
Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Full name of father These Descriptions	8. Full name of father Robert & Schwander
Residence of father tif deceased so state; And	Residence of father (if deceased so state) Policy . Only .
Birthplace of father (State or foreign country) . Carolina	Birthplace of father (State or foreign country)
Full maiden name of mother Jundan & Braulett	9. Full maiden name of mother Dorothy E. Sminchal
Residence of mother (if deceased so state) Qua	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) and	Birthplace of mother (State or foreign country)
tate of Indiana.	State of Indiana.
ounty of HENDRICKS ss: in this application is true and correct.	County of HENDRICKS ss: In this application is true and correct.
Signed & James I Duncar S.	Signed Kathleen marie Schwand
New Address P 1 Box 129 Monrow, in	New Address B. R. I Box 129 montayia
ubscribed and sworn to before me this 2 day of July 1981.	Subscribed and sworn to before me this 2 day of July 1851
HENDDICKS HENDDICKS	Man Some Russell Clerk HENDRICKS Circuit Court
Clerk Circuit Court	- Jeny T
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
e, 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
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
sale lacts which render the consent of the other parent unitcessary	
ate of Indiana,	State of Indiana, HENDRICKS
ounty of HENDRICKS \$88	County of Signed (Language Attached) Father
Signed Father	Signed Doroth & Schwardner Mother
Signed Mother	Signed Signed Quarter 181
abscribed and sworn to before me thisday of19	Subscribed and sworn to before me this. day of Research Clerk
Clark	1 / Duy
	T. A marriage license having been refused to the above named parties, the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the state and filed art by written order issued and filed art by written order issued and parties.
HENDRICKS County	f a marriage license to the above named parties.
Clerks O Colore authorizes and directs the issuance of	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
RETURN OF MARRIAGE LICENSE	se issued by the clerk of the
Be It Remembered, there was filed in my office a marriage	se issued by the clerk of the solution together as husband and wife and the solution of the so
Indiana dated the day of day	KOthellen
amily & Auncian + Florida my of	fice, to-wit: day of July day of
h C. Where the following marriage territories h	11) MM / 11 (1) () () () () () () () (
te thousand nine hundred and	Morgan County, State of Indiana
ate of India	County, State of County
ere by me united in marriage as authorized by a marriage license issued for tounty.	hat purpose by the Clerk of the Circuit Court of
ere by me united in marriage as authorized by a marriage license issued for t	Ochu C Mayrer
ated this day of July , 19.8)	Signed Signed
this day of	Official Designation 1981.

Signed....

rm Prescribed By jiana State Board of ADDITION	NDIANA
alth under Authors FOR M	ARRIAGE LICENSE
IC 31 14 1 1977 HENDRICKS	rileto
MALE	
Medical Examination Report Dated 6-18-81	FEMALE Date of Application
Name of Physician Donnell	Medical Examination Report Dated 6-18-8
LL QUESTIONS MUST BE ANSWERED, L.C. 31-1-3-6 prescribed "False statement—Whoeve all be fined in any sum not exceeding five hundred dollars (8500,00)". MALE APPLICANT	Name of Physician Drammola
all be fined in any sum not exceeding five hundred dollars (\$500,000".	er procures the issuance of a license to marry by any false statement, representation or profess
me First Middle	PEMALE APPLICANT
Birth Month Show Dukas On	First
ace of Birth (State or foreign country)	Date of Birth Month Day Schwandres
Jud.	Place of Birth (State or foreign country)
sidence Address Street or R. R. City County State	Residence Address
evious Marital Status Never Married OR	645 Kentucky ave. Perl Gunty State
st Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR
te of birth verified by Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment Date of birth world Annulment Date of birth Worl
Other (Specify)	Date of birth verified by: Birth Certificate Judicial Decree
Are you now or have you ever been adjudged to be of unsound mind? No Y Yes	Other(Specify)
If answer is "yes", has the adjudication been removed? No Tyes Tyes Tyes Tyes Tyes Tyes Tyes Tyes	1. Are you now or have you ever been adjudged to be of unsound mind? No Y Yes
Are you afflicted with a transmissible disease? No X Yes O	If answer is "yes", has the adjudication been removed? No □ Yes Are you afflicted with a transmissible disease? No ☑ Yes
Are you related to the female applicant closer than second cousin? No N Yes	3. Are you related to the male applicant closer than second cousin? No ♥ Yes
A. No TYes No TYes	4. Are you now under the influence of intoxicating liquor? No X Yes
	No Yes
	dent children.
7/1	181
	10000
Plain	field Ind. order or orders to support the above No - Yes
San	order or orders to support the above No□ Yes
	that this Application be accompanied by satisfactory proof that you are
0 00 + = 00	er or orders issued for their support.
Robert E. Schwar	Solvent & Schwander
C Comment	ostate) Pold. Inl.
	(ign country) Lle.
give my permission	for Dorothy E. Smirchall
	odiostate) Samo
my Saughter Hathleen	Marce Corner Country Sel
my caughter , for	ss: I depose and state the information give in this application is true and correct in this application is true and correct in this application.
I - To many	Mathicen mare Schward
Schwardner to marry	B.B. I Box 139 montay to
S. Duncan-fr.	Clerk HENDRICKS Circuit Cou
e. Demand g.	ARENT OR GUARDIAN
	licant hereby give consent for this marriage. If only one parer
	the concept of the other parent unnecessary
Robert E. Schwa	
Money & Nehwa	who -
rather	
	ss:
	General Jan attacked Father
	VIII TI & Love Lace Moth
Notory Margaine aun (Church 2
	Thursh Ore me this Same Russel Cler
Marjorie Ann C	in a land the second control of
Reside in Hendre	aving been refused to the above named parties, the
	2 -1 - 1 VILLE AND HIE
Billiage my commission expire	ne above named parties.
march 12, 198	PTIFICATE
	the
Co. Sendricke	authorizing the joining together as husband and wif
State of Indian	In Schwandner
July July July July July July July July	he 17th day of July Wich
JOHN C: VII DWEET Ner	1) anville , country of Discuss
thousand nine hundred and at	Morgan County, State of Indiana County, State of Indiana
	County State of
te of last	Len Queles HENDRICKS
te of Indiana, Groom Bride Outhless Wincam, of of wandner of the by me united in marriage as authorized by a marriage license issued for that inty.	to purpose by the Clerk of the Circuit Court of HENDRICKS AM C Mowrer

Official Designation day

Signed.

PUSSED! HENDRICKS

.Circuit Court

Dated this.

Form Prescribed By Indiana State Board of Health under Authority of 1.C. 31-1-3-2 Effective July 1, 1977 STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

__County

File

July 2, 1981

Date of Application

.....Circuit Court

		FEMALE Medical Examination Report Dated 7-1-8/	
MALE Medical Examination Report Dated 2-/- 8/		Medical Examination Report Dates	
Medical Examination Report Dated		Name of Physician R. Robinson	
Name of Physician R. Robertson			ntation
ANSWERED 10 31-1-3-6 prescribed	"False statement-Whoe	ever procures the issuance of a license to marry by any false statement, represen	reaction or pretensi
shall be fined in any sum not exceeding live number of))".	FEMALE APPLICANT	
MALE APPLICANT		Name First Middle	/ D Last
Name First Middle	Hassier	January More de	hooch
Date of Birth Months Day	Year	Date of Birth Month 26	ear 79
July 8	1956	Place of Birth (State or Foreign country)	
Place of Birth (State of toreign country)		Cal for Idel.	
Residence Address Street or R. B. City Cour		Residence Address Street or R. R. City County	State
9980 E 750M. Brownshung	And	KRIS MICK STORY	Ordio
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OR	
Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce Annulment	
Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate Judicial Decree	
		Other (Specify) Drivers Lie W/Pie	
Other (Specify) Drivers Lie w/Pie			
1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes D	1. Are you now or have you ever been adjudged to be of unsound mind?	No Yes
If answer is "yes", has the adjudication been removed?	No Yes 🗆	If answer is "yes", has the adjudication been removed?	No P Yes
2. Are you afflicted with a transmissible disease?	No Yes	2. Are you afflicted with a transmissible disease?	No□ Yes□
3. Are you related to the female applicant closer than second cousin?	No Yes 🗆	3. Are you related to the male applicant closer than second cousin?	No Yes
4. Are you now under the influence of intoxicating liquor?	No Yes 🗆	4. Are you now under the influence of intoxicating liquor?	No Yes
5. Are you now under the influence of a narcotic drug?	No Yes 🗆	5. Are you now under the influence of a narcotic drug?	No Yes
		6. List the full names of any dependent children.	
6. List the full names of any dependent children.			
7. Are you required by any court order or orders to support the above dependent children?	No □ Yes □	7. Are you required by any court order or orders to support the above dependent children?	No□ Yes [
If answer is "yes", it is required that this Application be accompanied by satisfact		If answer is "yes", it is required that this Application be accompanied by satisfactory	
	proof mat you are in		proof that you are i
compliance with any court order or orders issued for their support.		compliance with any court order or orders issued for their support.	
Full name of father 18 0 FOCO 75 . 75 - 75 - 75 - 75 - 75 - 75 - 75 -		8. Full name of father Carl D. Sekroels	
Residence of father (if deceased so state) Trounsburg, In		Residence of father (if deceased so state) Elm flurst, All.	
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign country)	. 1
Full maiden name of mother anna C. Wiley			to
		9. Full maiden name of mother Pearse R. Schul	0
Residence of mother (if deceased so state)	fr	Residence of mother (if deceased so state) Elm Aurst, All	
Birthplace of mother (State or foreign country) Indiana		Pirabeles of mather (States of miles and miles	
State of Indiana.	h :- (Birthplace of mother (State or foreign country) State of Indiana,	
County of HENDRICKS 88: I depose and state to	is true and correct.	County of HENDRICKS State of Indiana, I depose and state the in this application is	true and correct
Det BU.			
Signed Mattern D. Hessier		Signed Tommy M. Shoul	
New Address 9980 E 750 N Browns	bury In 46/12	New Address 9980 15750 N, 13 rawn	String, In
Subscribed and sworn to before me this	() 19		
HENDRIG		Subscribed and sworn to before me thisday ofday	
Clerk HENDRIC	Circuit Court	Clerk HENDRICKS	Circuit Cour
ONORS'T OR BARRIES BARRIES BARRIES			
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT OR GUARDIAN	
Ve, 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. I	f only one parer
igns, state facts which render the consent of the other parent unnecess	ary		
		signs, state facts which render the consent of the other parent unnecessar	y
tate of Indiana			***************************************
tate of Indiana. County of HENDRICKS ss:		State of Indiana,	
		County of HENDRICKS ss:	
Signed.	Father		
		Signed	Fathe
	Mother	Signed	Mothe
ubscribed and sworn to before me thisday of	, 19		
		Subscribed and sworn to before me this	, 19
	Clerk		Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY O	RDER OF COUR		
HENDRICKS County	or cour	T. A marriage license having been refused to the above name	d parties, th
n authorizes and di	Coı	art by written order issued	and file
	the issuance of	a marriage license to the above named narties	
the membered, there was filed in my offi	ice a marriage licens	Se issued by the state of the s	
f Indiana dated the day of day of	July	Se issued by the clerk of the HENDRICKS HENDRICKS HENDRICKS HENDRICKS HENDRICKS Authorizing the joining together as huse HENDRICKS	Circuit Cour
ANTHONY B. HESSION	0 1	, 19.01., authorizing the joining together as hust	and and wif
te it further remembered, the following marriage certificat WILLIAM A. PAPPANO	e was filed in my	fice to-unit	
MILLIAM A. PAPPANO		tereby certify that on the 11th day of JULY	
ne thousand nine hundred and 81	, , , , , , , , , , , , , , , , , , ,	tereby certify that on the lith day of JULY of County of F	
Indiana, GroomANTHONY D		Country of	IENDRICKS.
MARIE SCUDOCK		Hr.NDPTCVC County State of	
vere by me united in marriage as authorised.	of	HENDRICKS County, State of	IN
ounty.	license issued for t	hat many State of	IN
Pated this llth day of JULY		hat purpose by the Clerk of the Circuit Court of HENDR	ICV3
	, 19.81	•••	
		Signed /s/ WILLIAM A. PAPPANO	
iled and recorded in accordance with the laws of the State		Official Designation CATHOLIC PRIEST	
of the State	of Indiana this	11+h	***************************************

MALE

STATE OF INDIANA

APPLICATION FOR MA

on M	ARRIAG	EL	ICEN	SE	
NDRICKS				22	

HEN _County 7-6-81 Date of Application FEMALE Medical Examination Report Dated

Medical Examination Report Dated Name of Physician_ Name of Physician_ Ludmilla ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false MALE APPLICANT Name FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married OR Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate

Judicial Decree Other (Specify)_ Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? 1. Are you now or have you ever been adjudged to be of unsound mind No Yes D If answer is "yes", has the adjudication been removed? If answer is "yes", has the adjudication been removed No T Yes D 2. Are you afflicted with a transmissible disease Are you afflicted with a transmissible disease No To Yes D 3. Are you related to the female applicant closer than second cousin Are you related to the male applicant closer than se No Pes D Are you now under the influence of intoxicating liquor? Are you now under the influence of intoxicating liquor No 2 Yes 5. Are you now under the influence of a narcotic drug? No Yes O 5. Are you now under the influence of a narcotic drug? No P Yes 6. List the full names of any dependent children 6. List the full names of any dependent children. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No T Yes No TYes D If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Full name of father Sonald Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of ... 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 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. signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of Signed Signed. Mother Signed 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, theCourt by written order issuedauthorizes and directs the issuance of a marriage license to the above named parties. HENDRICKS RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE ... Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the. DENETIA G. STONE of Indiana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-wit: day of july ...hereby certify that on the1.2...... , County of HENDRICKS PLATNFIELD I,DEWEY A. THACKSTON .County, State of. one thousand nine hundred and 81 MORGAN State of Indiana, Groom DONALD B. BUIS .County, State 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 County. DEWEY A. THACKSTON County. JULY Signed .. Dated this. MINISTER Official Designation... .day ofAugust

3

Signed

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

MARY JANE RUSSELL

Clerk

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

__County

No. 234

7-6-8/ Date of Application

HENDRICKS Circuit Court

	FEMALE Medical Examination Report Dated 7-6-87
MALE Medical Examination Report Dated 7-6-81	Transfer of Contraction
Will Above II Silvery	Name of Physician
When the Answer of 10 31-1-3-6 prescribed "False statement—Who	power procures the issuance of a license to marry by any false statement, representation or pretens
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	FEMALE APPLICANT
Last	Name Cinthin Middle Shart
Name Class Gay Breneman Date of Birth Month Day Year	Date of Birth Month Day Year 28 1962
1/2 7 1959	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Residence Addressy Street or R. R. Sity County, State
Residence Address & Street or R. R. Clay to Genty State	General Delevery Cartenbury Gend Ind
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married OR
Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Uddicial Decree
	Other (Specify)
Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
If answer is "yes", has the adjudication been removed?	If answer is "yes", has the adjudication been removed?
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes C
3. Are you related to the female applicant closer than second cousin? No	3. Are you related to the male applicant closer than second cousin? No ♥ Yes □ 4. Are you now under the influence of intoxicating liquor? No ♥ Yes □
4. Are you now under the influence of intoxicating inquo:	5. Are you now under the influence of a narcotic drug? No Yes C
5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.	6. List the full names of any dependent children.
- Salar Marian M	
7. Are you required by any court order or orders to support the above dependent children? No Yes	7. Are you required by any court order or orders to support the above dependent children? No Ves C
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father 1/24 14. Dreneman	8. Full name of father ROBERT Clover Sharp
Residence of father (if deceased so state) Clay low Smol.	Residence of father (if deceased so state) Cartersburg, Ind.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother I artha Jano Colmwnelson	9. Full maiden name of mother Phyllis Carol Stewart
Residence of mother (if deceased so state) Clayton Inc.	Residence of mother (if deceased so state) Cartersburg, and
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Including
State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct	State of Indiana, I denote and state the information given
County of fast in this application is true and correct.	County of HENDRICKS sa: in this application is true and correct.
Signed & Alan Breneman	Signed & Cepethia ann Thaip
New Address RR2 Clayton	New Address RR2 Clarton
Subscribed and sworn to before me this day of fully 18	Subscribed and sworn to before me this Q day of Hely 10)
Mary Jan Presself HENDRICKS Circuit Court	Marilla so Reciball unionard
	1 1000 State Court 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 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.	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
SignedFather	County of
Signed	Signed Father
Subscribed and sworn to before me this day of , 19	Signed Mother
day 01, 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
HENDRICKS County Co	rt by written order issued
authorizes and directs the issuance o	f a marriage license to the
RETURN OF MARRIAGE LICENSE	E AND The second to the above named parties.
of Indiana dated the was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court
ALAN PAY PRENEMAN day of	The cierk of the There were court court
Be it further remembered, the following marriage certificate was six	ndCYNTHIA ANN THARR
I, FARIS D. FRANZ	se issued by the clerk of the HENDRICKS Circuit Court , 19, , authorizing the joining together as husband and wife nd CYNTHIA ANN THARP thereby certificable is a second of the court of
one thousand nine hundred and 81	creby certify that on the 18 day of JULY
State of Indiana, Froom ALAN RAY BRENEMAN	nd CYNTHIA ANN THARP ffice, to-wit: hereby certify that on the 18 day of JULY at CLAYTON , County of HENDRICKS OF HENDRICKS County, State of IN that purpose by the Clerk of the Circuit Count of HENDRICKS HENDRICKS HENDRICKS IN County, State of HENDRICKS
ana, Bride CALLILL ANN THARP	HENDRICKS County, State of IN
County.	that must be County, State of IN
County. Dated thisday of, 19, 19, 19	that purpose by the Clerk of the Circuit Court of HENDRICKS HENDRICKS County, State of IN HENDRICKS
, 19	
Filed and recorded in	Signed FARIS D. FRANZ
the laws of the State of Indiana this	2 Designation FASTOR
	Official Designation PASTOR 81
	Signed MARY JANE RUSSELL Clerk

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS __County

No	335	
File_	42	THE RESERVE
	-1.81	

MALE Medical Examination Report Dated \	Date of Application
Name of Physician Dr. M. Boom	FEMALE
	Medical Examination Report Dated 7-3-51
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement - Whose	Name of Physician Da M Banny
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoe shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ter procures the issuance of a license to marry by any false statement, representation or pretense
Name First Middle	FEMALE APPLICANT
Date of Birth Month Day Year	Name First Middle Lost
Place of Birth (State or foreign Quntry)	Date of Birth Month Day
Ind.	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address
Previous Marital Status: Never Married OR	128 E. R. N. City County State
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D
Other (Specify) & & Upict.	Date of birth verified by: Birth Certificate Judicial Decree
	Other (Specify) & Suprat
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes Yes No Yes Yes No Yes Yes Yes	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes U Yes U	If answer is "yes", has the adjudication been removed? No□ Yes□
3. Are you related to the female applicant closer than second cousin?	2. Are you afflicted with a transmissible disease? No S Yes D
4. Are you now under the influence of intoxicating liquor? No Yes -	 3. Are you related to the male applicant closer than second cousin? 4. Are you now under the influence of intoxicating liquor? No ✓ Yes □
5. Are you now under the influence of a narcotic drug? No R Yes	5. Are you now under the influence of a narcotic drug? No P. Yes D.
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Mans	None
	The second of th
	Washington and the second
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children? No□ Yes□
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father house & . Kally	8. Full name of father 2012 and 2015
Residence of father (if deceased so state) and plan, and	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Novey 1 2002	00 00000
/ > /	S. Fall made and the second se
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana, Lideness and state the information given	State of Indiana. I depose and state the information given
County of HENDRICKS 88: I depose and state the information given in this application is true and correct.	County of HENDRICKS sa: I depose and state the intrination given
Mil & Melly	Signed Jerife D. Burton
Signed The B DOV 220 / KINNS	New Address ARte. 8, Bet 324, Indpls.
New Address.	Subscribed and sworn to before me this day of day of
Subscribed and sworn to before me this day of	Subscribed and sworn to before the
	M. South HENDRICKS Circuit Court
Many Java Regard Clerk HENDRICKS Circuit Court	Mary Fre Rusholf Clerk HENDRICKS Circuit Court
Mary Jane Russell Clerk HENDRICKS Circuit Court	CONSENT OF PARENTS, PARENT OR GUARDIAN
Consent of Parents, Parent or Guardian	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 parent	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
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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.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS
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CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Father Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of 19	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. County of HENDRICKS 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 art by written order issued and filed at a marriage license to the above named parties. AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is issued by the clerk of the se issued by the clerk of the JENNIFER D. BURTON Mad. JENNIFER D. BURTON Machine JENNIFER D. BURTON Machine JENNIFER D. BURTON Machine JENNIFER D. Gounty of JULY Machine JENNIFER D. County of JULY Machine JENDRICKS County, State of JIN HENDRICKS County, State of JIN
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS 88: Signed Mother Signed Mother Subscribed and sworn to before me this day of 19	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of
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Signed.....

APPLICATION FOR MARRIAGE LICENSE

7761
1-6-01
Date of Application

Form Prescribed By Indiana State Board of APPLICATION FOR M	MARRIAGE LICENSE File 7-70-81
Health under Authority of LC. 31-1-3-2 HENDRICK	
Effective July 1, 1977	County Date of Application
	FEMALE W. Weel Examination Report Dated 7-3-87
MALE Medical Examination Report Dated 7-3-87	Medical Examination
	Name of Filysician
Name of Physician Sacryte Physics Statement - Whote	ever procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed. False states with shall be fined in any sum not exceeding five hundred dollars (8500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Effst Migdle b/ Last
Name Arst Middle Elhanks	Date of Birth Month Day Year
Date of Birth Month 20 Year	4 23 1443
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Ind.
Residence Address Street or R. R. O Sty // Equnty State	Residence Address Street or R. B. County State
GIOB Rateride Dr. Diffet Dend That	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Divorce	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree	Daires Lines
Other (Specify) Crivers dicense	Other (Specify) Are you now or have you ever been adjudged to be of unsound mind? No Yes Yes
1. Are you now or have you ever been adjudged to be of unsound mind?	 Are you now or have you ever been adjudged to be of unsound mind? No Yes □ If answer is "yes", has the adjudication been removed? No □ Yes □
If answer is "yes", has the adjudication been removed?	2. Are you afflicted with a transmissible disease? No Ves U
2. Are you afflicted with a transmissible disease.	3. Are you related to the male applicant closer than second cousin? No Yes
Are you related to the female applicant closer than second cousin? Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor? No Ves 0
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug?
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any conflorder or orders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Kobert Lee Eubants	8. Full name of father Mark N. Wellams
Residence of father (if deceased so state) Moorces will a small	Residence of father (if deceased so state) Wolsenbly
Birthplace of father (State or foreign country) Snotrono	X Na Kata
Ma. Ab	Birthplace of father (State or foreign country)
The state of the s	9. Full maiden name of mother Residence of mother (if deceased so state) Woodswill
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Show Show States of Medicar	Birthplace of mother (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.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
and Harman R. E. Soula	2.0011
New Address 610 "B Jak out Dr. Played dr	Signed Signed Old Old Old Old Old Old Old Old Old Ol
0 86/86	New Address 610. B Sakeside Plfa And 1616
Subscribed and sworn to before me this day of 19.5	Subscribed and sworn to before me this day of day of 198
Circuit Court	1) Over Jane Kusse Lak 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	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, County of HENDRICKS ss:	State of Indiana,
County of	County of HENDRICKS ss:
Signed Father	SignedFather
Signed	SignedMother
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of, 19
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	Clerk
HENDRICKS COURTY	T. A marriage license having been refused to the above named parties, the
in authorizes and directs the	T. A marriage license having been refused to the above named parties, the urt by written order issued
the issuance of	a marriage license to the above named parties
Be It Remembered there was flad in MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE
of Indiana dated the	se issued by the clerk of the HENDRICKS Circuit Court
Be it further remembered to Subants	se issued by the clerk of the HENDRICKS Circuit Court , 19 , authorizing the joining together as husband and wife and how to the second
I. Charles filed in my o	fice, to-wit:
one thousand nine hundred and	dereoy certify that on the
State of Indiana Groom	in that it is a second of the
State of Indiana, Groom Roymand R Eubanks and, Bride Lunda S Hamstra of	of Hondricks County of
were by me united in marriage as authorized by a marriage license issued for a county.	Hendricks County State of 10
County. Dated this. day of	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this day of July , 19 %	
	Signed Chal

Official Designation Minis

...Clerk

... Circuit Court

HENDRICKS

Circuit Court

HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS File 42

MALE	FEMALE Date of Application
Medical Examination Report Dated 9-25-81	- SHALE
Name of Physician 8. M. Hadby	Medical Examination Report Dated 6-12-81
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Name of Physician Q. M. Olose
shall be fined in any sum not exceeding the numbered dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of a license to marry by any false statement
Name First Middle	
Less Sant Janes	Name First FEMALE APPLICANT
Date of Birth	Date of Birth Month
Place of Birth (State or foreign country)	Day The Control
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)
RESULTATION State State	Residence Address Street or R. R. City County
Previous Marital Status: Never Married OR	THE PLY. County State
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
A Other (Specify) D. S. W/Peat.	Date of birth verified by: Birth Certificate Judicial Decree
	A Other (Specify) D. L. which.
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	1. Are you now or have
100 Tes II	If answer is "yes" has the adjust:
Tes 2	2. Are you afflicted with a transmissible disease? No No No Yes □
No K Tes U	3. Are you related to the male applicant closer than second cousin?
the first of the second of the	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
Dave.	6. List the full names of any dependent children.
1/212	Jone
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes Yes Yes Yes Yes Yes Yes Ye	dependent children? No Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father August Stages	compliance with any court order or orders issued for their support.
a · go	8. Full name of father Smald & Approach
Residence of father (if deceased so state)	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Stures Sturent	9. Full maiden name of mother Mary C. Sneetenburg
Residence of mother (if deceased so state)	5
	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) State of Indiana,	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.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
New Address 41/ North Vine et planfield.	Signed Cathy Lappincott New Address 4/1 Dine Plainfield
Subscribed and sworn to before me this day of the 19	Subscribed and sworn to before me this day of hely 19
M C O O O O O O O O O O O O O O O O O O	all a a con HENDRICKS
Many for Russell Clerk HENDRICKS Circuit Court	Clerk Circuit Court
CONSERVE OF PURPOSE	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 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	signs, state facts which render the consent of the other parent unnecessary
	Custo of Indiana
State of Indiana, County of HENDRICKS ss:	State of Indiana, HENDRICKS County of
County of HENDRICKS	Father
Signed Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me thisday of19	Subscribed and sworn to before me thisday of19
Clerk	Clerk
	house her refused 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
HENDRICKS County Cot	r. A marriage license hard and filed art by written order issued and filed a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	se issued by the clerk of the
I Indiana data the 13	, 19. Q, authorizing the joining together
aay of	d CATHY J. LIPPINCOTT
Be it further remembered, the following marriage certificate was filed in my of the street of the st	nce, we contifu that on the 18 day of JULY
STEVAN W. RANSON The thousand nine hundred and 81 State of Indiana.	CLAYTON , County of HENDRICK
ne thousand nine hundred and 81	MORGAN County, State 4N
Indiana Gram	UENDRICKS
ond, Bride CATHY J. LIPPINCOTT of core by me united in marriage as authorized by a marriage license issued for to county.	HENDRICKS County, State of IN HENDRICKS County, State of HENDRICKS HENDRICKS
vere by me united in manifest and authorized by a marriage license issued for t	nut par par
County.	81 Signed STEVEN W. RANSON
Oated this 18 day of JULY , 19	Signed MINISTER 81
	Official Designation JULY , 19
This this	27 day of Clerk

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

338

Date of Application

MALE (- 30 - 8/	FEMALE Medical Examination Report Dated 6-30-8/
Medical Examination Report Dated	Name of Physician Drie Clark
Name of Physician One (Jark)	
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	ever procures the issuance of a license to marry by any false statement, representation or pretense
MALE APPLICANT	Name First Middle Last
Name First Middle Bast	Name Vicke S. Slass
Date of Birth Month Day Year	Date of Birth (MMC) 1951
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
506 Enderly, apt of Brownshurg	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Dudicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Ma J	Other (Specify) Wa. Sicerce
Other (Specify) No Ves U	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes \(\text{No } \text{Yes } \text{Yes } \text{If answer is "yes", has the adjudication been removed?} \)	If answer is "yes", has the adjudication been removed? No Ves
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease? No Yes
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer than second cousin? No D Yes D
4. Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes	4. Are you now under the influence of intoxicating liquor? No □ Yos□ No □ Yes□ No □ Yes□
Are you now under the influence of a narcotic drug? No Yes List the full names of any dependent children.	6. List the full names of any dependent children.
	Lou Ilass
	any Alas
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No Yes	dependent children? No Ves D
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court orderor orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or green issued for their support.
8. Full name of father Jawance L. Barnes	8. Full name of father has less with their support.
Residence of father (if deceased so state) free pls. for .	Residence of father (if deceased so state) Plainfield, An
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Mildred Blacke	9. Full maiden name of mother Morman Fox
Residence of mother (if deceased so state) Anapho, An	Plantil
Birthplace of mother (State or foreign country)	Residence of mother (if deceased so state)
State of Indiana,	Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given
County of TENDRICKS (a) this application is true and correct.	County of HENDRICKS sa: In this application is true and correct.
Signed Signed 1 5 4 20 10 4	Signed Vicki S. Klass
New Address 506 ENDERLY AVE #4 BLOWNSLIPS, IN	New Address 506 Enderly aug apt 4 Brau
Subscribed and sworn to before me this day of the day o	Subscribed and sworn to before me this day of July 1971.
Clerk HENDRICKS Circuit Court	Therex are truspell clerk HENDRICKS Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	1
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
the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	
County of HENDRICKS ss:	State of Indiana,
Signed	County of HENDRICKS ss:
Tatlier	Signed Father
Signed	Signed Mother
uay or, 19	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	C. A marriage license having h
in County Cou	art by written order issued
to totaline of	a marriage license to the above named
Be It Remembered there are Chair of MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
of Indiana dated the day of	AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court
STEPHEN G. BARNES	, 19 5, authorizing the joining together as husband and wife
of Indiana dated the	rdVICKI S. GLASS
one thousand nine hundred and 81 h	ereby certify that on the
State of Indiana, Groom STEPHEN G. BARNES a	t INDPLS. day of JOLI
I, JOHN C. MOWRER one thousand nine hundred and 81 State of Indiana, Groom STEPHEN G. BARNES and, Bride VICKI S. GLASS HEN were by me united in marriage as authorized by a marriage license issued for the county.	HENDRICKS County of
were by me united in marriage as authorized by a marriage li-	County, State of IN
were by me united in marriage as authorized by a marriage license issued for the Dated this	hat purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 11 day of JULY , 1981	
	Signed JOHN C MOURER
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation JUDGE
	Signed MARY JANE RUSSELL Clerk
	Clerk Clerk

... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2

STATE OF INDIANA

No	33	9
Transfer of the last of the la	-	

APPLICATION FOR MARRIAGE LICENSE Effective July 1, 1977 HENDRICKS County Date of Application MALE FEMALE Medical Examination Report Dated Medical Examination Report Dated. Name of Physician_ Name of Physician. ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense MALE APPLICANT FEMALE APPLICANT First 536 Previous Marital Status. Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment D Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree □ Other (Specify)_ 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes O 1. Are you now or have you ever been adjudged to be of unsound mind? No D Yes If answer is "yes", has the adjudication been removed? No T Yes If answer is "yes", has the adjudication been removed No O Yes O 2. Are you afflicted with a transmissible disease No Yes NO Yes D 2. Are you afflicted with a transmissible disease 3. Are you related to the female applicant closer than second cou No D Yes No Yes 3. Are you related to the male applicant closer than second cousing No Yes No Yes 4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? Ng Yes No Yes 5. Are you now under the influence of a narcotic drug? 6 List the full names of any dependent children 6. List the full names of any dependent children 7. Are you required by any court order or orders to support the above 7. Are you required by any court order or orders to support the above No Yes No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in 8. Full name of father Allonge 8. Full name of father Alaxy Residence of father (if deceased so state) Birthplace of father (State or foreign country) Birthplace of father | State or foreign country). Residence of mother (if deceased so state) Birthplace of mother (State or foreign country)_ Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct. State of Indiana. HENDRICKS Signed Larry & Van Blancu Signed Pandall DYan arsolals New Address + 244 Landond New Address 42 44 Landonderry , 198/ HENDRICKS 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 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. signs, state facts which render the consent of the other parent unnecessary..... HENDRICKS State of Indiana, HENDRICKS Father County of Signed. Mother 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. .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 M., authorizing the joining together as husband and wife hules and TERRY JO VAN BLARICUM Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the _____day of ___JULY XXXXXXXX HENDRICKS INDPLS. County of I, GEORGE M. GILLESPIE ... County, State of HENBRIC KS State of Indiana, Groom. RANDALL D. VAN ARSDALE one thousand nine hundred and 81 ...County, State of ... INof.....MORGAN were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County. Signed......GEORGE M. GILLESPIE County. 11 day of JULY MINISTER Dated this. Official Designation..... .day of JULY

MARY JANE RUSEELL

Signed ..

HENDRICKS

...Clerk

Circuit Court

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	340
File_	42
	18-8-6
	Date of Application

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR M	ARRIAGE LICENSE	File 42
of I.C. 31-1-3-2 Effective July 1, 1977 HENDRICKS	County	Date of Application
TWO STATES OF THE STATES OF TH	FEMALE Medical Examination Report Da	ted 6-26-81
MALE Medical Examination Report Dated A. Handrock	Name of Physician	Hastrook.
Name of Physician Chas. A. Hasbrook ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever the company of the com	er procures the issuance of a license to marry t	y any false statement, representation or pre-
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 preserved. This shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE	APPLICANT
MALE APPLICANT	Name First	Middle Last
Name First Middle Year Year	Date of Birth Month	Day Year
Date of Birth Month	Place of Birth (State or foreign country)	
Place of Birth (State or foreign country) Control of 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 Nulear Town School NTC Ordando House	246 Shool Creek	Grand Brownell of
Previous Marital Status: Never Married OR	Previous Marital Status: Never Married ♥ OR Last Marriage Ended By: Death □ Divorce □	Annulment 🗆
Last Marriage Ended By: Death Divorce Annulment	Date of birth verified by Birth Certificate	Judicial Decree
Date of birth verified by: Birth Certificate Judicial Decree		
Other (Specify) No Yes No Yes	Other (Specify) Are you now or have you ever been adjudged to	be of unsound mind? No A
1. Are you now or have you ever been adjudged to be of dissolid limits.	If answer is "yes", has the adjudication been ret	
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease*	No the
3. Are you related to the female applicant closer than second cousin?	3. Are you related to the male applicant closer tha	and the second s
4. Are you now under the influence of intoxicating liquor? No Yes No Yes	Are you now under the influence of intoxicating Are you now under the influence of a narcotic of	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children.	6. List the full names of any dependent children	
1 one	Vano	
7. Are you required by any court order or orders to support the above	 Are you required by any court order or orders to dependent children? 	to support the above
dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in		eation be accompanied by satisfactory proof that you
compliance with any court order or orders issued for their support.	compliance with any court order or orders issue	
8. Full name of father Mir has I. J. Felly	8. Full name of father Sanald	141
Residence of father (if deceased so state)	Residence of father (if deceased so state) 9/2	
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)	
9. Full maiden name of mother Ruth & Stoddard	9. Full maiden name of mother Control	0 0 0
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)	Downshing , Ind ,
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country)	30.
State of Indiana. County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS	ss: I depose and state the information in this application is true and co
Signed & Frank Joseph Kelly	Signed to Cy	uthia Vinson
New Address 2416 SHOAL CREEK DA. BROWNSburg.	New Address 2 4960	Shoal Creek La. Brow
Subscribed and sworn to before me this day of July 1981.	Subscribed and sworn to before me this	9 ()
Many Jame Russel Rierk HENDRICKS Circuit Court	Mary Jona Russell	70
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 GU	
signs, state facts which render the consent of the other parent unnecessary.	We, the parents, of this applicant hereby gi	
	signs, state facts which render the consent	of the other parent unnecessary
		AND THE PROPERTY OF THE PROPER
		The second secon
State of Indiana,		ADD D 1 1 1 1 2 2 2 1 1 1 2 1 2 2 2 2 2 2
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS	881
SignedFather	Signed	F
Signed Mother		
Subscribed and sworn to before me this	Subscribed and sworn to before me this	1400 A - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
Clerk	and the delate me this	day of management of the second
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF GOVERN		***************************************
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County authorizes and directs the issuence of	C. A marriage license having been re	fused to the above named parties,
authorizes and directs the issuance of	a marriage license to the	and
of Indiana dated the day of day of	se issued by the clerk of the	HENDRICKS Circuit C
one thousand nine hundred and	ereby certify that on the	TIII.V
one thousand nine hundred and 81 State of Indiana, Groom FRANK J. KELLY CYNTHIA R. VINSON 9	t. KENDRICKE BROWNS	BURGCounty of HENDR-ONG
ana, Briate	ENDRICKE	County, State of
were by me united in marriage as authorized by a marriage license issued for the Dated this	L. (County, State of IN
Dated this	nat purpose by the Clerk of the Circuit	Court of HENDRICKS

Signed OZIE D. PRUETT

Signed MARY JANE RUSSELL

... Circuit Court

HENDRICKS

Official Designation CLERGYMAN

27 day of XXX JULY

Indiana State Board of Health under Authority APPLICATION FOR	FINDIANA No 341
of I.C. 31-1-3-2 Effective July 1, 1977	MARRIAGE LICENSE
HENDRICH HENDRICH	CS THE A
MALE	
Medical Examination Report Dated 2-1-81	FEMALE Date of Application
Name of Physician D. / Jourson	Medical Examination Report Dated 2-1-8/
ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ever procures the issuance of the
MALE APPLICANT	the issuance of a license to marry by any false statement, representation or pretense
Name First Middle	FEMALE APPLICANT
Date of Birth Day Manth	Name / First Middle / Last
april 28 18-11	Date of Birth Month Day
Place of Birth (Stay) or foreign country)	Place of Birth (State or foreign country) 23 1961
Residence Address Street or R. R. City County State	- Ilmonda. The 1.
P.O. Dog 144 amo Incl.	Residence Address Street or R. R. Street of R. R. County State
Previous Marital Status: Never Married OR	Brown Will Sor Six Claylon And.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment D Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Drivers Lie W/Pies	Birth Certificate U Judicial Decree
the state was a search of the state of the s	Other (Specify)
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes I If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes
No I Ies	If answer is "yes", has the adjudication been removed?
	2. Are you afflicted with a transmissible disease?
les -	3. Are you related to the male applicant closer than second cousin?
4. Are you now under the influence of intoxicating liquor? 5. Are you now under the influence of a narcotic drug? No Yes	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug?
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No□ Yes□	dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order oporders issued for their support.	compliance with any court order or orders issued for their support.
8. Full name of father Cellows C. Vicycles	8. Full name of father Sordon W. Voughy
Residence of father (if deceased so state) Mobileville, Andiove	Residence of father (if deceased so state) Cloylyn, Andlora
Birthplace of father (State or foreign country) Uncliona	Birthplace of father (State or foreign country)
9. Full maiden name of mother Mary Rossie Crows	9. Full maiden name of mother Carolyn La Vonne Pickett
Morresvillo dudine	Clanton Lucki
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Andlova	Birthplace of mother (State or foreign country) Graculoru
State of Indiana, County of HENDRICKS Set: Indepose and state the information given this application is true and correct.	State of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.
County of TIETORICKO	County of
Signed Holling A A Subgrand	Signed Stephany 11. Vaugas
New Address / 100 100 144 (mw Jud 46/03	New Address P.O. Box 144 Uma Indiana 46,
Subscribed and sworn to before the this day of	Subscribed and sworn to before me thisday of, 19
HENIDDICKS	Gerk HENDRICKS Circuit Court
Clerk 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 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	signs, state facts which render the consent of the other parent unnecessary
	Quit of Indiana
State of Indiana,	State of Indiana, HENDRICKS
County of HENDRICKS S8:	County of Father
Signed Father	Signed
Mother	Signed
Signed	Subscribed and sworn to before me this day of , 19
Subscribed and sworn to before me thisday of	Clerk
Clerk	fund to the share named narties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been relused to the above hamed parties, and filed
HENDRICKS LICENSE ISSUED BY GROWN Co	ourt by written order issued
The At Remembered there was filed in my office a my range	authorizing the joining together as nusbana and wife
of Indiana dated the day of day of	STEPHANY M. VAUGHN
Be it further general the following marriage certificate was filed in my o	ffice, to-wit: 18 day of JULY
Be it further remembered, the following marriage certificate was filed in my o I, TOM MCGILLIARD	hereby certify that of STILESVILLE County of HENDRICKS

and, Bride STEPHANY M. VAUGHN of HENDRICKS County, State of IN

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.

JULY

I, TOM MCGILLIARD

one thousand nine hundred and 81

Dated this ..

Official Designation MINISTER Signed MARY JANE KR RUSSELL HENDRICKS

Signed TOM MCGILLIARD

STILESVILLE , County of HENDRICKS

HENBRICKS County, State of IN

....Clerk Circuit Court Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

No. 342
File 12
Date of Application

..... Circuit Court

WALE .	FEMALE Medical Examination Report Dated 7-7-8)
MALE Medical Examination Report Dated 7 - 7 - 87	Name of Physician Cric Clark
Name of Physician Michael Helly	
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Who	ever procures the issuance of a license to marry by any false statement, representation or pretent
hall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	FEMALE APPLICANT
ame First & Middle Keilfon	Name III. Mande
ate of Birth Month Day	Date of Birth Month 1960
ace of Birth (State or foreign country)	Place of Birth (State or foreign country)
Milleune State	Residence Address Street or R. R. City County State
esidence Address Street for R. R. Warnille Nend. Ind.	The Wind or and and
revious Marital Status: Never Married OR	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Annulment
ast Marriage Ended By: Death Divorce Annulment	Date of birth verified by: Birth Certificate Judicial Decree
ate of birth verified by: Birth Certificate Judicial Decree	# 8541
Other (Specify) Devel's lecense W/ficture	Other (Specify)
Are you now or have you ever been adjudged to be of unsound mind? No Yes No Proposed?	 Are you now or have you ever been adjudged to be of unsound mind? No
If answer is "yes", has the adjudication been removed:	2. Are you afflicted with a transmissible disease?
Are you afflicted with a transmissible disease? Are you related to the female applicant closer than second cousin? No. Yes	3. Are you related to the male applicant closer than second cousin? No yes
Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor?
Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
List the full names of any dependent children.	6. List the full names of any dependent children.
Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes 1
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Full name of father Concept New Man. Reifler	8. Full name of father Ruchard alle Van Wormer
Residence of father (if deceased so state) 163 M. Grifan St., Dunully	Residence of father (if deceased so state)
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country) Muchagan
Full maiden name of mother Charles Mail Kogier	9. Full maiden name of mother Faith margaret Coffman
Residence of mother (if deceased so state)	Residence of mother (if deceased so state) and play and
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Au Mow York
tate of Indiana. HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, I depose and state the information give
county of	County of HENDRICKS ss: in this application is true and correct
Signed Deian E Leffe	Signed Wall My World
New Address /717 Doug Hoop # 105 GRAPEUNE TE.	New Address 1717 Dave doop #1705.
ubscribed and sworn to before me this 16 day of July 1951.	Subscribed and sworn to before me this 7 day of July 198
Wary Jame Kussell Clerk HENDRICKS Circuit Court	Makes Jane Russel Gerk HENDRICKS Circuit Cou
	Circuit Con
ONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN
e, 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 pare
gns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the consent of the other parent unnecessary
ate of Indiana,	
unty of HENDRICKS ss:	State of Indiana, County of HENDRICKS ss:
Signed Father	
Signed	SignedFath
bscribed and sworn to before me this	Signed Moth
	Subscribed and sworn to before me thisday of, 19
	Cle
MPLETE 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
TO THE MARRIAGE LICENSI	F AND WARRY
Indiana dated the	E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Country , 19 , authorizing the joining together as husband and wind DIANE M. VAN WORMER
e it further remembered, the following marriage certificate was filed in my o	nd DIANE M. VAN WORMER
WILLIAM A DADDANO	bree, to-wit.
e thousand nine hundred and 81	ffice, to-wit: hereby certify that on the 18th day of JULY at INDIANAPOLIS , County of MARION of DALLAS , County of TEXAS HENDRICKS , TN
ace of Indiana, Groom EDWARD REIFFER	County of MARION
ere by me united in	DALLAS County, State of IN that purpose by the Classes County, State of IN County, State of IN
ounty.	that much County, State of
ated this 18th day of JULY , 19.81	HENDRICKS HENDRICKS
, 19.81	
led and recorded in accordance	Signed /s/ WILLIAM A. PAPPANO Official Designation
ed and recorded in accordance with the laws of the State of Indiana this	Official Designation CATHOLIC PRIEST
	day of MAY , 19 89

APPLICATION FOR 1 APPLICATION FOR 1 HENDRICK	MARRIAGE LICENSE S No. 343 File
MALE Medical Examination Report Dated 7-8-87	FEMALE 7. 9 - 81 Date of Application
I. QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "False statement—Whose timed in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	Medical Examination Report Dated 7-8-87 Name of Physician Wesley Sundermoun
me First Waldle W Nufford Day Year Year	Name (MG) A Middle
idence Address Street of R. R. B. Gity County State	Place of Birth (State or forgen country) Residence Address Street or R. R.O. City City

Previous Marital Status Never Married O OR Last Marriage Ended By Death Divorce Annulment Date of birth verified by Birth Certificate Judicial Decree 1. Are you now or have you ever been adjudged to be of unsound mind? No Yes D If answer is 'yes' has the adjudication been removed No D Yes D related to the female applicant closer than second cousin." ou now under the influence of a narcotic drug? 6. List the full names of any dependent children.

7.	Are you required by any court order or orders to support the above dependent children."
	If answer in "yes" it is required that this Application be accompanied by satisfactory proof that you are is
	compliance with any course affilier or orders issued for their support. Full name of father. Charles Husbord
*	Full name of father Charles + Alexand
	Residence of father (If decreased so state) Brownshurg and.
	Birthplace of father State or to engrecountry Brownshing Ind.
9	Full maiden name of mother Dernice Fout

Brownsking, Sud Brownsbling . Ind. 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	} ***
Signed	Father
Signed	Mother
Subscribed and sworn to before me this	day of

Previous Marital Status: Never Married OR	rion to
Last Marriage Ended By: Death Divorce D Annulment D	Of the Control
Date of birth verified by: Birth Certificate Judicial Decree	
Other (Specify) Driver Le ninno	
1. Are you now or have you ever been adjudged to be of unsound mind?	
If answer is "yes", has the adjudication been removed?	No Yes C
2. Are you afflicted with a transmissible disease?	No Ves
3. Are you related to the male applicant closer than second cousin?	No Yes
4. Are you now under the influence than second cousin?	No Yes C
4. Are you now under the influence of intoxicating liquor?	No Yes
5. Are you now under the influence of a narcotic drug?	No Yes C
6. List the full names of any dependent children.	
autemen Harmard	
Norek Stanger	The state of the
week Hayzara	

If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.

8. Full name of father flunch. Deceasean Residence of father (if deceased so state)_ Birthplace of father (State or foreign country holps Inc Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS

CONSENT OF PARENTS, PARENT OR GUARDIAN

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

HENDRICKS Mother

Clerks Exect authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS

of Indiana dated the MANDARIN A. HAZZARD hereby certify that on the 1 day of JULY
BLOOMINGTON ADDROSE JAY A. HUFFORD Be it further remembered, the following marriage certificate was filed in my office, to-wit: , County of ELMER D. RIGGS County, State ofIN one thousand nine hundred andof HENDRICKS State of Indiana, Groom JAY A. HUFFORD County, State of MARION MANDARIN A. HAZZARD County.

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

JULY

Dated this

Signed ELMER D. RIGGS

Official Designation..day ofJULy MARY JANE RUSSELL HENDRICKS Signed.....

..Clerk Circuit Court Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

File_ 7-10-81 Date of Application

	FEMALE Deted (0-15-87
MALE Medical Examination Report Dated Medical Examination Report Dated	Medical Examination Report Dated
	Name of Physician / Rer Well Acce
Name of Physician 774 Co. 11.13-6 prescribed "False statement—Who	ever procures the issuance of a license to marry by any false statement, representation or pretense
ALL QUESTIONS MUST BE ANSWERED. I.C. 317336 pt. shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMALE APPLICANT
MALE APPLICANT	Name Pirst Middle Plant Last
Name First Migdle Long	Date of Birth Month Day Year
Date of Birth Month Day Year 1924	Place of Birth (State or foreign country)
Place of Birth (State or foreign/country)	Campon alle 19
Residence Address Street or R. R. City Gounty State	Residence Address Street or R. R. Maples Fla
RIS BOX 134 STRAIG FRAME. STREET	Previous Marital Status: Never Married OR
Previous Marital Status: Never Married OR	Last Marriage Ended By: Death Divorce Annulment
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Date of birth verified by:	driving Meisse W/ picture
Other (Specify) Drivers Sicenso of filellise	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes C
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes \(\text{No} \) Yes \(\text{No} \)	If answer is "yes", has the adjudication been removed? No Yes C
If answer is "yes", has the adjudication been removed.	2. Are you afflicted with a transmissible disease* No □ Yes C
 2. Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin? No Yes □ 	3. Are you related to the male applicant closer than second cousin ⁹ No ☐ Yes ☐
4. Are you now under the influence of intoxicating liquor?	4. Are you now under the influence of intoxicating liquor ⁹ No □ Yes □
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narcotic drug? No Yes
6. List the full names of any dependent children.	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or orders to support the above
dependent children? No □ Yes □	dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are compliance with any court order or orders issued for their support.
compliance with any court order or orders issued for their support. 8. Full name of father the fat	8. Full name of father with any court order or orders issued for their support.
Residence of father (if deceased so state)	Residence of father (if deceased so state) Fillmone Ry
2 / / /	A the first
gus yn Juston	Birthplace of father (State or foreign country)
9. Full maiden name of mother the first state of th	9. Full maiden name of mother A Para III a Maria Maria
Residence of mother (if deceased so state)	Residence of mother (if deceased so state)
Birthplace of mother (State or foreign country) Usbana, Surface of mother (State or foreign country)	Birthplace of mother (State or foreign country). Billing 1944
State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.	State of Indiana, Country of HENDRICKS Bas: I depose and state the information give in this application is true and correct the state of the information give in this application is true and correct the information give
County of The Wild Correct.	County of TIENDRICKS
Signed follow a hour	Signed Littly Il al Lemmen John
New Address A D BOX 5	New Address 14/8 60x 154
Subscribed and sworn to before me this day of July 1987.	Subscribed and sworn to before me this 22 day of July , 190
1 lary Jan Russel Gerk HENDRICKS Circuit Court	Mary And Estable Gerk HENDRICKS Circuit Cour
	1
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 parent	We, the parents, of this applicant hereby give consent for this marriage. If only one parents
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,	
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS
. Signed	Sound of
Signed Mother	Signed Fath
	Signed Moth
Subscribed and sworn to before me this	Subscribed and sworn to before me this
Clerk	Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COM	DT A
	RT. A marriage license having been refused to the above named parties, t
authorizes and directs the issuance	ourt by written order issued and file
KETTEN OF MADDIAGE	
Be It Remembered, there was filed in my office a marriage lice of Indiana dated the	SE AND MARRIAGE CERTIFICATE
of Indiana dated the 22 day of Italy	nse issued by the clerk of the HENDRICKS Circuit Countries, 19 , authorizing the joining together as husband and wi
Be it further remembered the following	and BETTY MAE PENNINGTON office, to-wit:
ANDREW B. CREWING	office, to-wit:
ne thousand nine hundred and 81	office, to-wit: hereby certify that on the 8 day of AUGUST
tate of Indiana, Groom LOREN E. LONG	County of MARION
and, Bride BETTY MAE DENNITY	of MARION HENDRICKS County State of IN
vere by me united in marriage as authorized by a marriage.	COLLIER County, State of FLORIDA
Dated this 8 day of AUGUST 19 8	31
	Signed ANDREW B CROWLEY
Filed and recorded in accordance with the laws of the State of the	Official Designation MINISTER
of the State of Indiana this	Official Designation MINISTER 12 day of AUGUST 19 81 Signed MARY JANE RUSSELL Cle
	Signed MARY JANE RUSSELL Cle

HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of IC 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

2/15
No. 345
7-10-87
Date of Application
ort Dated 6-15-81
M. J. Scamahoin
marry by any false statement, representation or pretense
ALE APPLICANT
Day, Mitchell
14 195-8
R. R. Dity Sonty state
OR OR
orce Annulment
icate Uddicial Decree
ers dicense Specture No Ses D
been removed? No Yes No Yes
isease? No W Yes D
oser than second cousin? No Yes O Xicating liquor? No Yes O
Arcotic drug? No Wes O
The same of the sa
orders to support the above No No Yes
Application be accompanied by satisfactory proof that you are in
Craig Metchell
Tettabero Ind
In offener Brusher
Pittsbord Inch
ntry Lebanon Ind.
ss: I depose and state the information given in this application is true and correct.
hall M. Mitchell
1 Byal Liston, In.
10 day of July 1981.
LALL Clerk HENDRICKS Circuit Court
DR GUARDIAN
by give consent for this marriage. If only one parent
nsent of the other parent unnecessary
} ss:
Father Mother
day of 19
Clerk
n refused to the above named parties, the
and filed
amed parties.
HENDRICKS Circuit Court
the joining together as husband and wife
I.
.5day of
Courty State of IN
County, State of IN County, State of HENDRICKS
'A Count of

MINISTER

HENDRICKS

.Clerk

Circuit Court

JULY MARY JANE RUSSELL

Official Designation.

Signed

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

HENDRICKS County MALE Report Dated (15-8)
M. Scanahorn Medical Examination Report Dated____ FEMALE Medical Examination Repo Name of Physician___ Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to MALE APPLICANT Place of Birth (State or Previous Marital Status. Never Married OR Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married Last Marriage Ended By: Death Dive Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by: Birth Certif Other (Specify)___ Other (Specify) 1. Are you now or have you ever been adjudged to be of unsound mind? 1. Are you now or have you ever been adj If answer is "yes", has the adjudication been removed? No□ yes□ If answer is "yes", has the adjudication 2. Are you afflicted with a transmissible disease? 2. Are you afflicted with a transmissible of 3. Are you related to the female applicant closer than second cousin? 3. Are you related to the male applicant c ou now under the influence of intoxicating liquor? 4. Are you now under the influence of into 5. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of a na 6. List the full names of any dependent children. 6. List the full names of any dependent ch 7. Are you required by any court order or orders to support the above Are you required by any court order or No□ Yes□ dependent children If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this compliance with any court order or ord Residence of father (if deceased so state) Birthplace of father (State or foreign cour Full maiden name of mother_ Residence of mother (if deceased so state). Birthplace of mother (State or foreign country)_ Birthplace of mother (State or foreign cou State of Indiana, HENDRICKS HENDRICKS New Address.. Subscribed and sworm to before me thi Subscribed and sworn to before me this... Jone Ku CONSENT OF PARENTS, PARENT CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant here We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the co signs, state facts which render the consent of the other parent unnecessary..... State of Indiana, HENDRICKS State of Indiana, HENDRICKS Subscribed and sworn to before me this _____day of _____ COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been ...authorizes and directs the issuance of a marriage license to the above na RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICAT Be It Remembered, there was filed in my office a marriage license issued by the clerk of the... and PHYLLIS M. MITCHEL of Indiana dated the 10 Be it further remembered, the following marriage certificate was filed in my office, to-wit: WILLIAM CHARLES McGRAW hereby certify that on the one thousand nine hundred and 81.... State of Indiana, Groom MICHAEL C. PRICE of.... HENDRICKSof...... were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circ and, Bride. PHYLLIS M. MITCHELL WILLIAM C. MCGRAW JULY Signed. Dated this

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

346 42 7-10-81

liana State Board of APPLICA alth under Authority 1.C. 31-1-3-2	HENDRICKS	ARRIAGE LICENSE	Data of	Application
ective July 1, 1977		FEMALE		
MALE Medical Examination Report Dated	81	Medical Examination Report	Dated	-81
Medical Examination Report		Name of Physician	, W. Berter	
and the state of t	False statement—Whoeve	r procures the issuance of a license to ma	arry by any false statement, re	presentation or pretense
all he fined in any sum not exceeding		I Biviz	ALE APPLICANT Middle	
MALE APPLICANT me First Middle	Last	Name First	Lynn	Miller
te of Birth Month	Year 60	Date of Birth Month	15	Year
ace of Birth (State or foreign country)	40	Place of Birth (State or foreign country		County State
sidence Address Street or R. R. City County	y State	Residence Address Street or R	R. PIFL IN	State State
KERY DOX 33 TELLE WILL		Previous Marital Status: Never Married	OR	
evious Marital Status: Never Married OR st Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divor	cate U Judicial Decree	
ate of birth verified by: Birth Certificate Judicial Decree				
A Other (Specify) O rivers Lio	N	Other (Specify) 1. Are you now or have you ever been adjud	iged to be of unsound mind?	No Yes D
Are you now or have you ever been adjudged to be of unsound mind?	No Yes No Yes	If answer is "yes", has the adjudication be		No□ Yes□
If answer is "yes", has the adjudication been removed? Are you afflicted with a transmissible disease?	No Yes 🗆	2. Are you afflicted with a transmissible dis		No Y Yes
Are you related to the female applicant closer than second cousin?	No Yes O	 Are you related to the male applicant clo Are you now under the influence of intox 		No Yes O
Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug?	No Y Yes	5. Are you now under the influence of a name	rcotic drug?	NoA Yes□
List the full names of any dependent children.		6. List the full names of any dependent chil	dren.	
None		Maro		
The shows		7. Are you required by any court order or o	orders to support the above	
Are you required by any court order or orders to support the above dependent children?	No □ Yes □	dependent children? If answer is "yes", it is required that this		No Ves O
If answer is "yes", it is required that this Application be accompanied by satisfacto compliance with any court order or orders issued for their support.	ory proof that you are in	compliance with any court order or order	rs issued for their support.	state of y proof that you are in
Full name of father Sandanial Walls		8. Full name of father Robert	Willer	
Residence of father (if deceased so state) Dations and		Residence of father (if deceased so state)	and and	-
Birthplace of father (State or foreign country)		Birthplace of father (State or foreign count	of Brist	
Full maiden name of mother Maley. Jones		9. Full maiden name of mother	2	
Residence of mother (if deceased so state)	Shal,	Residence of mother (if deceased so state)	a O O	*
Birthplace of mother (State or foreign country).	ne information given	Birthplace of mother (State or foreign cour State of Indiana,	GC .	te the information given ion is true and correct.
ounty of HENDRICKS 885 in this application is	s true and correct.	County of HENDRICKS		
Signed Standay was	LX S		aren of Mu	
New Address SC BOD 2189 PON			Box 2189	
	18 11	Subscribed and sworn to before me this		
Manglow Russel Clerk HENDRICK	Circuit Court	Warn Jone you	Clerk HEND	Circuit Court
ONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PARENTS, PARENT	OR GUARDIAN	
e, the parents, of this applicant hereby give consent for this marriage.		We, the parents, of this applicant her	eby give consent for this mar	riage. If only one parent
gna, state facts which render the consent of the other parent unnecess	sary	signs, state facts which render the co	nsent of the other parent unr	ecessary
ate of Indiana,		State of L		
ounty of HENDRICKS } **:		State of Indiana, County of HENDRICKS		
Signed	Father	Signed		Father
Signed	Mother	Signed		Mother
abscribed and sworn to before me this day of	19	Subscribed and sworn to before me thi	sday of	, 19
to provide the second s	Clerk			
OMPLETE IF MARRIAGE LICENSE ISSUED BY O	ORDER OF COURT	C. A marriage license having bee	en refused to the above	named parties, the
County	C	1 1		and filed
authorizes and di	DDIACE TICE			
Be It Remembered, there was filed in my off	fice a marriage licens	AND MARRIAGE CERTIFICA	TE HENDRICKS	Circuit Court
of many		10X/		. I and write
e it further remains and a second of the LEE WAT	te was fled in man	KAREN LYNN MI	I.I.F.P.	
to far ther remembered, the following marriage certificat	the state of the my of			
R. AGARGON				
ne thousand nine hundred and 81 tate of Indiana, Groom DONALD LEE WARREN LYNN MII ere by me united in marriage as authorized by a marriage	h	ereby certify that on the 18.	day ofJULY	PION

Signed R.B. ACHESON

Signed MARY JENE RUSSELL

Official Designation ORDAINED MINISTER

... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of IC 31 1 3 2 Effective July 1 1937

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

File_

MALE	
Medical Examination Report Dated 7-9-87	FEMALE Date of Application
Name of Physician James Black	Medical Examination Report Pated 7-9-87
ALL QUESTIONS MUST BE ANSWERED, LC. 31-1-3-6 prescribed "False statement—Whe shall be fined in any sum not exceeding five hundred dollars (85000 out". MALE APPLICANT	perser procures the issuance of a license to many l
Name Pipet Middle (Sasy)	Name FOR APPLICANT
Date of Birth Month Day Year	Date of Birth Shella Rene 114 Valo
Place of Birth (State of Spreign country)	Day Year
Residence Address Struct or R. R. City Country	Place of Birth (State or foreign couptry)
106 Deana Wr. B. Durg New Sind	Residence Address Street or R. R. Gill County , States
Previous Marital Status Never Married O'OR	a source pourg send such
Last Marriage Ended By Death Divorce Annulment D	Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate U Judicial Decree
Other (Specify)	
1 Are you now or have you ever been adjudged to be of unsound mind? No G Yes D	Other(Specify)
If answer is 'yes' has the adjudication been removed. No No Yes D	1. Are you now or have you ever been adjudged to be of unsound mind? No 2 Yes 2 If answer is "yes", has the adjudication been removed? No 2 Yes 2
2. Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible discuss
3. Are you related to the female applicant closer than second cousin. No 2 Yes 0 4. Are you now under the influence of intensicating liquore.	3. Are you related to the male applicant closer than second cousin? No Yes
Are you now under the influence of interstrating liquoe? No 2 Yes 0 No 2 Yes 0 No 2 Yes 0	4. Are you now under the influence of intoxicating liquor? No Yes O
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Yes O
	6. List the full names of any dependent children.
2. Are you required by any year value or other as and a second or other second	
7. Are you required by any court order or orders to support the above dependent children. No D. Yes D.	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court feeture or orders is speed togetheir supports	compliance with any court offer or orders issued for their support.
8. Full name of father for the well the the	8. Full name of father Skeldon Lee Weldle
Residence of father in discessed to states. In TURNOUT TO	Residence of father (if deceased so state) Crawfordswille Ind
Birthplace of father i State or foreign country's Sufficients	Birthplace of father (State or foreign country) Simulanus.
9. Full master name of mother BOTHLY Kitch Duglin	9. Full maiden name of mother. Hancy Jeanette Bright
Residence of mother is decreased so states Grown burg Ind .	Residence of mother (if deceased so state) & Drownshing Ind_
Birthplace of mother 1 State or Parenge country andiane	ladia.
State of Indiana.	State of Indiana. I depose and state the information given
County of HENDRICKS so; in this application is true and correct.	County of HENDRICKS as: I depose and state the information given in this application is true and correct.
signed Amas Della	Signed Stilla Wille 1
Now Address 293 Rembras Cow Saledway	New Address 29/3 Embassy Low
Subscribed and sworn to before me this	Subscribed and sworn to before me this
HENDRICKS	Clerk HENDRICKS Circuit Court
Clerk 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 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.	signs, state facts which render the consent of the other parent unnecessary
	and the second of the second o
State of Indiana. County of HENDRICKS ***	State of Indiana, HENDRICKS ss:
Father	Signed Father
	Signed Mother
Signed Mother	Subscribed and sworn to before me thisday of19
Subscribed and sworn to before me this day of . 19	Subscribed and sword to before the Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENDRICKS	art by written order issued
in authorizes and directs the issuance of	f a marriage license to the above named parties.
PETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered there was filed in my office a marriage ucen	together as husband and wife
of Indiana dated the 15 day of Occasion	se issued by the clerk of the
	ereoy certify the Hendisches
State of lating Tomas D. Boll	Heranty State of
and, Bride	County, State of County, State of HENDRICKS
were by me united in marriage as authorized by a marriage license issued for	nat par P
County.	Signed George Davis
Dated this day of Aug., 1981	11/1/1/2/5
TOTAL STREET,	Official Designation , 1981
Filed and recorded in accordance with the laws of the State of Indiana this	day of Clerk HENDRICKS Count Count
	Signed HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of APPL	ICATION FOR	MARRIAGE LICENSE	File 42	
Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICK		Date of A	5-81 Application
		FEMALE Medical Examination Report Da	ted	1
MALE Medical Examination Report Dated	18	Name of Physician	Denne	
Name of Physician 3. Denny			y any false statement, rep	resentation or vers
ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 preser shall be fined in any sum not exceeding five hundred dollars (850)	fibed "False statement—Who 00,00)".	ever procures the issue.	A DDI ICANT	or pretense
MALE APPLICANT		Name First	APPLICANT Middle	Last
Name First Middle	Smith So.	Date of Birth Month	Ray	Malley
Date of Birth Month Day	Year 0	Place of Birth (State or foreign country)	Ray \	the o
Place of Birth (State or foreign country)		Residence Address Street or R. R.	City Con	unty State
Residence Address Street or R. R. City 3 2 3 4	County State	3236 6 Pts. Rd.	apt 9 Ind	unty State
Previous Marital Status: Never Married OR		Previous Marital Status: Never Married OR		
Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce Date of birth verified by: Birth Certificate	Annulment U	- THE
Date of birth verified by: Birth Certificate Judicial Decree		2000		
Other (Specify) Truscas die		Other (Specify)		
1. Are you now or have you ever been adjudged to be of unsound mind?	No □ Yes □	Are you now or have you ever been adjudged to If answer is "yes", has the adjudication been ren		No X Yes O
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	No Yes□	2. Are you afflicted with a transmissible disease?		No X Yes D
3. Are you related to the female applicant closer than second cousin?	No ♥ Yes □	3. Are you related to the male applicant closer than		No X Yes 🗆
 Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug? 	No Yes □	Are you now under the influence of intoxicating Are you now under the influence of a narcotic di		No Yes O
Are you now under the influence of a harconic drug. List the full names of any dependent children.	· · ·	6. List the full names of any dependent children.		
Jones		Vans		
Are you required by any court order or orders to support the above dependent children?	No□ Yes□	Are you required by any court order or orders to dependent children?	support the above	No□ Yes□
If answer is "yes", it is required that this Application be accompanied by sat	isfactory proof that you are in	If answer is "yes", it is required that this Applica	tion be accompanied by satisfa	ctory proof that you are in
compliance with any court order or orders issued for their support. 8. Full name of father Sach W. Smith	5.	compliance with any court order or orders issued 8. Full name of father Raymands	11	
Residence of father (if deceased so state)	8	Residence of father (if deceased so state)	F 1	
Birthplace of father (State or foreign country)			Devas	
9. Full maiden name of mother April 2000		9. Full maiden name of mother that le		Lenge
Residence of mother (if deceased so state) May soll,	nd.	Residence of mother (if deceased so state)	w.	
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country)	2 mm.	
State of Indiana, County of HENDRICKS Sa: I depose and state in this application	the information given n is true and correct.	State of Indiana,	I depose and state the	
	11 1	County of	0	20
Signed Supply Six Rts. Ld. Co		Signed Lad		Halley
Subscribed and sworn to before me this day of		New Address 3236		11 Brap
Mary Jame Russell Clerk HENDR	Icke	Subscribed and sworn to before me this.		19.0.1
	Circuit Court	Many Jane Busin S.	Clerk HENDRICK	Circuit Court
CONSENT OF PARENTS, PARENT OR GUARDIAN	+	CONSENT OF PARENTS, PARENT OR GUAI	RDIAN	
We, the parents, of this applicant hereby give consent for this marria signs, state facts which render the consent of the other parent unnec		We, the parents, of this applicant hereby give	consent for this marriage.	If only one parent
the consent of the other parent unnec	essary	signs, state facts which render the consent of	the other parent unnecessor	вгу
			***************************************	***************************************

State of Indiana,			***************************************	***************************************
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS		
Signed		Signed		Father
Signed	Mother	Signed		***************************************
Subscribed and sworn to before me this	, 19	Subscribed and sworn to before me this		***************************************
	Clerk			Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY HENDRICKS County	ORDER OF COURT	A marriage line in the second		the the
HENDRICKS County authorizes and	Cour	t by written order issued	ed to the above nam	ed parties, the
	and the of a	marriage license to the above named	arties.	and
Be It Remembered there was Chili	ARRIAGE LICENSE	AND MARRIAGE CERTIFICATE		
of Indiana dated the	1 1001/190	tosued by the clerk of the	NDRICKS	Circuit Court
of Indiana dated the day of day of day of SMITH, JR. Be it further remembered, the following marriage certifications of the second day of day	And	, 19. (), authorizing the jo	ining together as hu	sband and wife
I, JOHN C WOMBER	ate was filed in my offic	ce, to-wit:	***************************************	
one thousand nine hundred and		cos certify that on the	day of	
Court of Indiana, Groom		A LV V		TOVC
order, Drue		Con	ntu State of IN	
were by me united in marriage as authorized by a marria County. Dated this	ge license issued for the	at purpose by the Clerk of the Circuit Co	nty, State of HENI	ORICKS
Dated this 20 day of JULY	, 1983			
		Signed	C. MOWRER	***************************************
Filed and recorded in accordance with the laws of the Sta	te of Indiana this	ficial Designation JUDGE 27		81
	S	igned XME MARY JANE R	USSELL	9
		At a second	the say that that that	***************************************

Form Prescribed By Indiana State Board of Health under Authority of LC. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

349

	County 7-14-81
MALE 7-1 SI	Date of Application
Medical Examination Report Dated 7-7-8/	FEMALE Medical P. 7 7 CO
Name of Physician Harnet R. Warne	Medical Examination Report Dated 7-7-87
ALL OUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 procogile-1 are	Name of Physician Garnet Narres
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Who shall be fined in any sum not exceeding five hundred dollars (\$500,00)", MALE APPLICANT	ever procures the issuance of a license to marry by any false statement, recognition
Name First Middle D. Last	Name Officer APPLICANT
Date of Birth Month Day Year	(Middle Middle Me Lagt)
Place of Birth (State or foreign country)	Date of Birth Bonth Day Year
Julipa Inmini &	Place of Birth (State or foreign country)
Residence Address Oreet or R. R. City County State	Residence Address A Street of R. P. J.
The state of the s	2322 Sate of tentes mb Local Soul
Previous Marital Status. Never Married OR Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by Birth Certificate - Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) William Sulland Gutture	1 0 - 1
1. Are you now or have you ever been adjudged to be of unsound mind?	Other (Specify) Drilles Dicense
If answer is "yes", has the adjudication been removed? No □ Yes □	1. Are you now or have you ever been adjudged to be of unsound mind?
2. Are you afflicted with a transmissible disease? No Yes	If answer is "yes", has the adjudication been removed?
3. Are you related to the female applicant closer than second cousin? No Yes 🗆	2. Are you related to the male applicant clear
4. Are you now under the influence of intoxicating liquor? No Yes O	3. Are you related to the male applicant closer than second cousin? No ☐ Yes ☐ 4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
5. Are you now under the influence of a narcotic drug? No Ves D	5. Are you now under the influence of intoxicating liquor? No G Yes 0 Yes 0
6. List the full names of any dependent children.	6. List the full names of any dependent children.
Joshua Nemill Pape	Jeremiah allen Me Fadyen
	of the state of th
 Are you required by any court order or orders to support the above dependent children? No □ Yes □ 	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for thir support.
8. Full name of father Forrest Nale Poul	8. Full name of father William Day
Residence of father (if deceased so state) 4nonaum	Residence of father (if deceased so state) Harlanky
and i	March V.
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Alkryng State Smith	9. Full maiden name of mother Willey 11 fall Surner
Residence of mother (if deceased so state) Softler Aprillo .	Residence of mother (if deceased so state) Harlankly
Birthplace of mother (State or foreign country)	Birthplace of mother (State or foreign country) Harlan Ky
State of Indiana, depose and state the information given	State of Indiana.
County of HENDRICKS 188: in this application is true and correct.	County of HENDRICKS 88: in this application is true and correct.
Salatore	Signed Langia ME Langer
Signed at the state (a receal DP	New Address 2332 dake of Lantens Dr
New Address 2322 (AKE OF THE CANTERN DK.	11/1 () 11/1 ()
Subscribed and sworn to before me this day of 19	Subscribed and syprn to before me this day of HENDRICKS Circuit Court
May the Mesell Clerk HENDRICKS Circuit Court	That gent court
40	
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 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.	signs, state facts which render the consent of the other parent unnecessary
signs, state facts which render the consent of the other parties	
State of Indiana.	State of Indiana, HENDRICKS
County of HENDRICKS ss:	County of
Father	SignedFather
Signed	Signed
Signed Mother	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of19	Subscribed and swoth Clerk
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	of a marriage license to the above named parties.
HENDRICKS County the inquence of	of a marriage license to the above named parties.
inauthorizes and directs the issuance	WARPIAGE CERTIFICATE HENDRICKS
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court nse issued by the clerk of the
The At Remembered there was filed in my office a marriage	authorizing the joining together as hasound that wife
of Indiana dated the day of	· Slower
Earl W Jool Glad in my	office, to-wit: 19th day of July
Be it further remembered, the following marriage certificate was filed in my	hereby certify that on the
1, Joles	at Sendricks County, State of Indiana
one thousand nine hundred and	
	County, State of
and, Bride land as authorized by a marriage vicense issued for County.	that purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage vicense issued for	al Balena
	1. Signed of Paul Dudge
Dated this day of	Disposition William Court Court

Official Designation ...

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

_County

350

File. 7-14-8]
Date of Application

Name of Physician FEMALE APPLICANT Name FEMALE APPLICANT Date of Birth Date of Birth Female application Place of Birth (State or foreign couptry) Residence Address Previous Marital Status Never Married Date of birth verified by Other (Specify) Are you now or have you ever binen adjudged to be of unsound minds Are you related to the male applicant closer than second cousins Are you now under the influence of anacount drugs Are you now under the influence of anacount drugs List manuful names of any dependent children Are you required by any court order or orders to support the above dependent children. If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are rompitance with any court order or orders as support the above dependent children. If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are rompitance with any court order or orders as support their support. At
Date of Birth (State or foreign country) Place of Birth (State or foreign country) Residence Address Street op R. R. City Country State Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment Decree Date of birth verified by Sirth Certificate Judicial Decree Other (Specify) Unit Certificate Judicial Decree If answer is "yes" has the adjudication been removed No Yes Are you afflicted with a transmissible disease No Yes Are you related to the male applicant closer than second cousin No Yes Are you now under the influence of intoxicating liquing No Yes List mortal names of any dependent children Are you required by any court order or orders to support the above dependent children Yes it is required that this Application be accompanied by satisfactory proof that you are
Date of Birth (State or foreign country) Place of Birth (State or foreign country) Residence Address Street op R. R. City Country State Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment Decree Date of birth verified by Sirth Certificate Judicial Decree Other (Specify) Unit Certificate Judicial Decree If answer is "yes" has the adjudication been removed No Yes Are you afflicted with a transmissible disease No Yes Are you related to the male applicant closer than second cousin No Yes Are you now under the influence of intoxicating liquing No Yes List mortal names of any dependent children Are you required by any court order or orders to support the above dependent children Yes it is required that this Application be accompanied by satisfactory proof that you are
Date of Birth Mopth Day 1939 Place of Birth (State or foreign country) Residence Address Street op R. R. State Country State Previous Marital Status Never Married OR Last Marriage Ended By Death Discord Annulment Day Date of birth verified by Sirth Certificate Dudicial Decree Other (Specify) Discord Annulment No Yes If answer is "yes" has the adjudication been removed No Yes Are you related to the male applicant closer than second cousin No Yes Are you now under the influence of intoxicating liquing No Yes Are you now under the influence of intoxicating liquing No Yes List to full names of any descendent children No Yes Are you required by any court order or orders to support the above dependent children Yes If in required that this Application be accompanied by satisfactory proof that you are
Previous Marital Status Never Married OR Last Marriage Ended By Death O Divarce Annulment O Date of birth verified by Other (Specify) I Are you now or have you ever been adjudged to be of unsound mind No Yes Are you afflicted with a transmissibile disease No Yes Are you now under the influence of intoxicating liquor No Yes Are you now under the influence of intoxicating liquor No Yes List and full names of any dependent children Are you required by any court order or orders to support the above dependent children. If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are
Previous Marital Status Never Married OR Last Marriage Ended By Death O Divarce Annulment O Date of birth verified by Other (Specify) I Are you now or have you ever been adjudged to be of unsound mind No Yes Are you afflicted with a transmissibile disease No Yes Are you now under the influence of intoxicating liquor No Yes Are you now under the influence of intoxicating liquor No Yes List and full names of any dependent children Are you required by any court order or orders to support the above dependent children. If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are
Previous Marital Status Never Married OR Last Marriage Ended By Death Discrete Annulment Date of birth verified by Sirth Certificate Judicial Decree Other (Specify) 1 Are you now or have you ever theen adjudged to be of unsound mind* If answer is "yes" has the adjudication been removed No Yes Are you related to the mair applicant closer than second cousin No Yes Are you now under the influence of intoxicating liquid. Are you now under the influence of intoxicating liquid. Are you now under the influence of an narcotar drug. List and full names of any dependent children The you required by any court order or orders to support the above dependent children. If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are
Previous Marital Status Never Married OR Last Marriage Ended By Death O Divarce Annulment O Date of birth verified by Other Certificate O Judicial Decree Other (Specificate Other Specificate Other Specification
Date of birth verified by Sirth Certificate Judicial Decree Other (Specify Judicial Decree Ju
Date of birth verified by Sirth Certificate Judicial Decree Other (Specify Judicial Decree Ju
Other (Specify Rules adjudged to be of unsound mind." Are you now or have you ever been adjudged to be of unsound mind." No Prest Are you afflicted with a transmissible disease." Are you related to the male applicant closer than second cousin." Are you now under the influence of intoxicating liquor. Are you now under the influence of a narcotar drug." No Prest Are you now under the influence of a narcotar drug." No Prest N
If answer is "yes" has the adjudication been removed. Are you afflicted with a transmissible disease. Are you related to the male applicant closer than second cousin. No Per Yes C. Are you now under the influence of intoxicating liquor. Are you now under the influence of a narcotar drug. No Per Yes C. Are you now under the influence of a narcotar drug. No Per Yes C. Are you required by any dependent children. The pour required by any court order or orders to support the above dependent children. If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are
If answer is "yes" has the adjudication been removed. Are you afflicted with a transmissible disease. Are you related to the male applicant closer than second cousin. Are you now under the influence of intoxicating liquor. Are you now under the influence of a narcotic drug. No. Yes. List are full names of any dependent children. Are you required by any court order or orders to support the above dependent children. If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are
Are you required by any court order or orders to support the above dependent children. Are you required by any court order or orders to support the above dependent children. If answer 10 "yes" it is required that this Application be accompanied by satisfactory proof that you are
Are you required by any court order or orders to support the above dependent children. In a required by any court order or orders to support the above the large of that you are the required that this Application be accompanied by satisfactory proof that you are
Are you now under the influence of intoxicating liquing. No Yes Are you now under the influence of a narcotic drug. List am full names of any dependent children Children Are you required by any court order or orders to support the above dependent children. If answer 10 "yes," it is required that this Application be accompanied by satisfactory proof that you are
5 Are you now under the influence of a narootic drug." No Yes List are full names of any dependent children The you required by any court order or orders to support the above dependent children." If answer is "yes," it is required that this Application be accompanied by satisfactory proof that you are
Are you required by any court order or orders to support the above dependent children. If answer to "yes," it is required that this Application be accompanied by satisfactory proof that you are
The you required by any court order or orders to support the above dependent children." If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you an
dependent children." No W Yes If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you an
dependent children." No W Yes If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you an
dependent children." No W Yes If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you an
If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you an
8. Full name of father Sichary andrew Sturm
Residence of father of decreased so was Sypna Sol
Birthplace of father (State or toreign courgery) Mickliffe Sand.
4 Full maiden name of mother Gernice, ash
Luxu Sud
Residence of mother of documend an state
Burthplace of mother (State or foreign country)
State of Indiana. County of HENDRICKS State of Indiana. I depose and state the information y in this application is true and con
Leti- Mal
signed & accept the source who
New Assers 109 Factorate Wille
Subscribed and swope to before me the day of the subscribed and swope to before me the day of the subscribed and swope to before me the subscribed and swope to be subscr
7/ Kery June Bushell Hendricks Circuit
CONSERVE OF PARENTS BARENT OF CUARMAN
CONSENT OF PARENTS, PARENT OR GUARDIAN
We, the parents, of this applicant hereby give connent for this marriage. If only one parents, of this applicant hereby give connent for this marriage.
signs, state facts which render the consent of the other parent unnecessary
The state of the s
State of Indiana.
County of HENDRICKS
Signed
Signed
Subscribed and sworn to before me this day of
RT. A marriage license having been refused to the above named parties
Court by written order issued and
of a marriage license to the above named parties.
SE AND MARRIAGE CERTIFICATE
ense issued by the clock of the MENDRICKS Circuit
, 1981, authorizing the joining together as husband and
and totaless from feel
at County of Hendrick
of House County of Hersel
County, State of County, State of
or that purpose by the Clerk of the Circuit Court of HENDRICKS

Official Designation.

Circuit Court

HENDRICKS

Signed.

.Circuit Court

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRI

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I.C. 31-1-3-2 Gective July 1, 1977 HENDRICKS	File 42
MALE	County
Medical Examination Report Dated	FEMALE Date of Application
Name of Physician Dm. Edwards	Medical Examination Report Dated > -14-81
	Name of Physician Don Edwards
LL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whoe all be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	ver procures the issuance of a license to marry by any false statement, representation or pretervo
MALE APPLICANT First Middle	
Donne	Name First Middle Local
ate of Birth	Date of Birth Branch
ace of Birth (State or the reign country)	Place of Birth (State or foreign country)
esidence Address Street or R. R. City County State	
7772 Eagle Valley tass Vedplo.	Residence Address Street or R. R. City County State
revious Marital Status: Never Married OR	Previous Marital Status: Never Married OR
ast Marriage Ended By: Death Divorce Annulment D	Last Marriage Ended By: Death Divorce Annulment
ate of birth verified by: Birth Certificate Judicial Decree	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) Recy Cart (Selective Size daw)	
Are you now or have you ever been adjudged to be of unsound mind? No Yes -	A Other (Specify) Sources de N Pect.
If answer is "yes", has the adjudication been removed? No Ves	1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed? No Yes
Are you afflicted with a transmissible disease?	2. Are you afflicted with a transmissible disease?
Are you related to the female applicant closer than second cousin? No Yes	3. Are you related to the male applicant closer than second cousin? No ▼ Yes□
Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes No Yes	4. Are you now under the influence of intoxicating liquor?
List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No N Yes
Con a	6. List the full names of any dependent children.
	Dearra
	Diay
Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above dependent children?
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
compliance with any court order or orders issued for their support.	compliance with any court order or orders issued for their support.
Full name of father Secret A. Carr	8. Full name of father Your D. Swith
Residence of father (if deceased so state) Descased.	Residence of father (if deceased so state)
Birthplace of father (State or foreign country) Kanas	Birthplace of father (State or foreign country)
Full maiden name of mother Bornice Smith	9. Full maiden name of mother Milded Cooper
Residence of mother (if deceased so state) and place. and	Residence of mother (if deceased so state)
0,0	Birthplace of mother (State or foreign country)
Birthplace of mother (State or foreign country) State of Indiana. I depose and state the information given	State of Indiana. I denose and state the information given
County of HENDRICKS in this application is true and correct.	County of HENDRICKS ss: in this application is true and correct.
Signed & Amio Care	Signed & Muller Damely
211 Marcal DJ Disuntient In	New Address 344 Vestal Rd. PRd. In.
New Address Sty Work Styles 1981.	Subscribed and sworn to before me this
Subscribed and sworn to before me this.	Mass Save Russell Clerk HENDRICKS Circuit Court
May Jour Clerk Clerk Circuit Court	- Constant
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 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	signs, state facts which render the consent of the other parent unnecessary.
signs, state facts which render the consent of the other parent	
	The state of the s
State of Indiana,	State of Indiana, HENDRICKS County of
County of PICINDRICKS	Signed
Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of19
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to betote me
Clerk	and the state of t
TOTAL OF COLL	RT. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULT	ourt by written order issued
County	of a marriage license to the above named parties
in classes of the authorizes and directs the isothern	SE AND MARRIAGE CERTIFICATE the issued by the clerk of the the isining together as husband and wife
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice	nse issued by the clerk of the
Be It Remembered, there was filed in my office a man	Ohilles Danet
of Indiana dated the day of	and July
Be it further remembered, the following marriage certificate was filed in my	hereby certify that on the day of County of Co
1, John C. Mourer	hereby certify that the country of Country of Manuelle Country of Manuelle Country of Malana
one thousand nine hundred and	at Jendricks County, State of Indiana,
	County, State of HENDRICKS
State of Indiana, Groom South South State of Indiana, Groom of and, Bride of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for	Day C. Thowrer
Data I III	Signed Sendricks superior Ct. II
day of	Decignation Allage

APPLICATION FOR MARRIAGE LICENSE

Day of Application	ile			
Date of Application		1	151	10
Date of Application	y	ally	14,	198
- Trppilcation	0	Date of	Applic	ation

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..... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority APPLICAT		MARRIAGE LICENSE	File	14 1981
of I.C. 31-1-3-2 Effective July 1, 1977	HENDRICK		Daye of A	Application
MALE Medical Examination Report Dated 7-9-8/		FEMALE Medical Examination Report I		-81 in hal
Ly links In a minist	w M.	Name of Physician Audit	ry by any false statement, rep	resentation or protection
Name of Physician August West West All QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "Fa	llse statement—Whoe	ever procures the issuance of a nectice	D ADDITION NO.	or preten
shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT		FEMAL	E APPLICANT Middle	1 1-1
Name First . Middle	Last	Velores	a. Na	where
Date of Birth Month Day Ye	1926	Date of Birth Month Place of Birth (State or foreign country)	Day 7	Year 1936
Place of Birth (State or foreign, country)	State)	Residence Address Street or R. R.	City Co	State State
Residence Address Street of R. R. L. May John Rd. My	· M.	Previous Marital Status: Never Married (or pa. fr	ga de
Previous Marital Status: Never Married OR		Last Marriage Ended By: Death Divorce	Annulment	
Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree		Date of birth verified by: Birth Certificate	Judicial Decree	
hu hi alum	The	Other (Specify) Ousun	e Munice 1	acture
Other (Specify) William Millian Plans	No Yes 🗆	Are you now or have you ever been adjudged	d to be of unsound mind?	No to Yes
1. Are you now or have you ever been adjudged to be of unsound mind?	No □ Yes □	If answer is "yes", has the adjudication been		No□ Yes
If answer is "yes", has the adjudication been removed? 2. Are you afflicted with a transmissible disease?	No Yes 🗆	2. Are you afflicted with a transmissible disease		No Yes
Are you related to the female applicant closer than second cousin?	No Yes 🗆	3. Are you related to the male applicant closer		No Tes
4. Are you now under the influence of intoxicating liquor?	No Yes 🗆	4. Are you now under the influence of intoxica		No Tyes
5. Are you now under the influence of a narcotic drug?	Ng Yes	5. Are you now under the influence of a narcot		No Tes
6. List the full names of any dependent children.		6. List the full names of any dependent childre	an.	
		•		
7. Are you required by any court order or orders to support the above dependent children?	No□ Yes□	Are you required by any court order or orded dependent children?	ers to support the above	No□ Yes
If answer is "yes", it is required that this Application be accompanied by satisfactory p	proof that you are in	If answer is "yes", it is required that this App	plication be accompanied by satisfa	actory proof that you are
compliance with any court order or orders issued for their support.	/	compliance with any court order or orders is	ssued for their support.	1 . 00
8. Full name of father Feland Marker (le	ye .	8. Full name of father Alph	Lory W.	right
Residence of father (if deceased so state) Suy father (If.	miple	Residence of father (if deceased so state)	me supelio	John .
Birthplace of father (State or foreign country)	,	Birthplace of father (State or foreign country)	Intolo	At:
9. Full maiden name of mother Lala Mal Miss	isht	As a	Cathenine	Gett
Cuporat DA	Det 10	9. Full maiden name of mother	- Alexant	Sel: In
Residence of mother (if deceased so state)	maglo.	Residence of mother (if deceased so state)	muany	MIN ONE
Birthplace of mother (State or foreign country)		Birthplace of mother (State or foreign country	Alpla.	SA.
State of Indiana, County of HENDRICKS ss: I depose and state the in this application is t		State of Indiana, County of HENDRICKS	ss: I depose and state in this application	the information give n is true and correc
Warie O Charles	,	M.	1. 6/	land :
Signed Affin Control	5	SignedA.	coris a. A	aux per
New Address / X 2 dan fond K	- di	New Address	82 Man J	ones Ka
Subscribed and sworn to before me this day of	, 19	Subscribed and sworn to before me this	day of	18/4 , 19.
May June Blessell Clerk HENDRICKS	Circuit Court	Mary Jan Suscell	Clerk HEMDRI	Circuit Cou
CONSENT OF PARENTS, PARENT OR GUARDIAN		CONSENT OF PAPENTS, PAPENT OF	CHARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If	only one parent	CONSENT OF PARENTS, PARENT OR		
signs, state facts which render the consent of the other parent unnecessary	y	We, the parents, of this applicant hereby		
the content of the other parent unnecessary	***************************************	signs, state facts which render the conser	nt of the other parent unnec	essary

State of Indiana,				·····
County of HENDRICKS ss:		State of Indiana, County of HENDRICKS	} ss:	
Signed	E-41			
		Signed		Fathe
Signed		Signed		Moth
		Subscribed and sworn to before me this	day of	, 19
COMPLETE IN MADRAGE				Cle
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORI HENDRICKS County	DER OF COUR	T. A marriage license having been	refused to the above r	named parties, th
HENDRICKS County authorizes and directions.	Co	urt by written order issued		and file
RETURN OF MADE	DIAGE Issuance o	I a marriage license to the above nan	ned parties.	
of Indiana dated the day of	a marriage licen	E AND MARRIAGE CERTIFICATE	HENDRICKS	Circuit Cou
of Indiana dated the 20 day of 200	ly	198/ authorisis	the joining together	hushand and wi
the following marriage certificate	un- C1 1 .	The state of the s	VIV.	
one thousand nine but 1 1 1 C	······	hereby certify that on the		
one thousand nine hundred and S. State of Indiana, Groom S. CEUIN E. Clark		at hash hard has	aay of	adricks
State of Indiana, Groom Mervin & Clark and, Bride Delocia Handins		or Hardricks	County of	
were by me united in marriage as authorized by a marriage lie	of	Hendricks	County, State of)
were by me united in marriage as authorized by a marriage lied County. Dated this day of the county	cense issued for	that purpose by the Clerk of the Circu	ait Court of HE	NDRICKS
Dated this day of July	1981		ovare of	
		Signed Dly +	tendrike	
Filed and recorded in accordance with the laws of the State	. I., 2.	Official Designation Past	Land of the state of the state of	
Filed and recorded in accordance with the laws of the State of	Indiana this	day of Ava		19

Form Prescribed By form rescribed By Indiana State Board of Health under Authority of LC 31.1.3.2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

County

HENDRICKS

No	353	
File_	The second second	
	7-14-87 Date of Application	
	Date of Application	
	The second secon	

Circuit Court

MALE Medical Examination Report Dated_ FEMALE Michael Medical Examination Report Dated. Name of Physician_ ALL QUESTIONS MUST BE ANSWERED, LC, 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense FEMALE APPLICANT Date of Birth Previous Marital Status Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By Death Divorce Annulment Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by Birth Certificate Judicial Decree Date of birth verified by:

Birth Certificate

Judicial Decree 1. Are you now or have you ever been adjudged to be of unso No Yes O If answer is "yes" has the adjudication been rem If answer is "yes", has the adjudication been removed? No D Yes D ou afflicted with a transmissible disease 2. Are you afflicted with a transmissible disease? 3. Are you related to the male applicant closer than second cousin you now under the influence of intoxicating liquor Are you now under the influence of a narcotic drug! 5. Are you now under the influence of a narcotic drug? List the full names of any dependent children 6. List the full names of any dependent children Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above No T Yes No Tyes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in-State of Indiana, HENDRICKS State of Indiana. HENDRICKS Tennis Clark Scats 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 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. signs, state facts which render the consent of the other parent unnecessary. HENDRICKS State of Indiana. HENDRICKS County of Signed COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the authorizes and directs the issuance of a marriage license to the above named parties. 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 authorizing the joining together as husband and wife day of day HENDRICKS and Sherry Elaine Davis Lens Clark Scott hereby certify that on the day of August Be it further remembered, the following marriage certificate was filed in my office, to-wit: at Denville of Hendricks County, State of 10 Sardin of Herdrick 5 County, State of IN one thousand nine hundred and S State of Indiana, Groom Dennis Clark Scott day of August , 1981 Signed Dated this. Official Designation Signed Sang James Filed and recorded in accordance with the laws of the State of Indiana this.....

Form Prescribed By Indiana State Board of Health under Authority STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

HENDRICKS

Circuit Court

	-1	5-8	5/
Date	of	Appl	cation

of I.C. 31-1-3-2 Effective July 1, 1977 FEMALE Medical Examination Report Dated MALE Medical Examination Report Dated Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. LC. 31-1-3-6 prescribed "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 Middle Name wans Date of Birth Day Date of Birth RRH Previous Marital Status: Never Married OR Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree Other (Specify) Drums Lie No Yes O 1. Are you now or have you ever been adjudged to be of unsound mind No Ves 🗆 1. Are you now or have you ever been adjudged to be of unsound min If answer is "yes", has the adjudication been removed No D Yes D No Yes If answer is "yes", has the adjudication been removed? No Yes D No Ves 2. Are you afflicted with a transmissible disease 2. Are you afflicted with a transmissible disease? No Ves D Are you related to the male applicant closer than second cousi No Xes Are you related to the female applicant closer than second cousing No Ves 0 4. Are you now under the influence of intoxicating liquor Are you now under the influence of intoxicating liquor? No Yes 5. Are you now under the influence of a narcotic drug? Are you now under the influence of a narcotic drug? List the full names of any dependent children. Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children dependent children? If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in Indrew Residence of father (if deceased so state) Birthplace of father (State or foreign country) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct. State of Indiana, I depose and state the information given in this application is true and correct. **HENDRICKS** HENDRICKS County of .. County of 19.8 HEMORICKS .. 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 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. signs, state facts which render the consent of the other parent unnecessary State of Indiana HENDRICKS State of Indiana, County of. HENDRICKS County of Father Signed. 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. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... HENDRICKS of Indiana dated the .. , 195 authorizing the joining together as husband and wife E. GIVANS Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Dennis L. Vodson hereby certify that on the one thousand nine hundred and 3 State of Indiana, Groom Doct & and, Bride Sharon 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. Filed and recorded in accordance with the laws of the State of Indiana this..... Official Designation ..

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

MALE Medical Examination	Report Dated	7-14-81
Name of Physician	M.O.	Scamalow

County 7-15-81 Date of Application FEMALE Medical Examination Report Dated.

HENDRICKS County, State of.....

Signed /s/ WILLIAM A. PAPPANO

CATHOLIC PRIEST

SYE MAY

HENDRICKS

... Circuit Court

Name of Physician_ stement – Whoever procures the issuance of a license to marry by any false statement, representation or pretense acceding five hundred dollars (\$500,000) MALE APPLICANT FEMALE APPLICANT Middle Place of Birth (State or foreign country) Place of Birth (State or foreign country) Previous Marital Status Never Married OR Last Marriage Ended By Death Divorce Annulment D Previous Marital Status: Never Married R OR Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by Birth Certificate Judicial Decree Date of birth verified by: Birth Certificate Judicial Decree Other (Specify)_ 1 Are you now or have you ever been adjudged to be of unso No Yes D 1. Are you now or have you ever been adjudged to be of unsound mind? If answer is 'yes' has the adjustication been re-No Yes D If answer is "yes", has the adjudication been removed? Are you afflicted with a transmissible disease No A Yes No O Yes O 2. Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin? No X Yes No K Yes D Are you related to the male applicant closer than second cousin? you under the influence of intoxicating liquor No The Yes No Y Yes 4. Are you now under the influence of intoxicating liquor? No TYes D No Yes 5. Are you now under the influence of a narcotic drug? 6. List the full names of any dependent children No Yes D 6. List the full names of any dependent children Are you required by any court order or orders to support the above Are you required by any court order or orders to support the above dependent children? No D Yes D If answer is "yes" it is required that this Application be accompanied by satisfactory proof that you are in No Tyes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their suppor Residence of father (if deceased so state) Sources Birthplace of father (State or foreign country) 9. Full maiden name of mother Shares Q Residence of mother infidenessed so states Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS State of Indiana. HENDRICKS Signed Stomes P Dehrees New Address 1175 Wastarde de Beownsterna 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 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. signs, state facts which render the consent of the other parent unnecessary... State of Indiana, HENDRICKS State of Indiana. HENDRICKS County of County of Signed..... Signed. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County Sep Court by written order issued 3-Day h Danes and filed authorizes and directs the issuance of a marriage license to the above named parties. a delle 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...... AMES PAUL SCHREIER of Indiana dated the hereby certify that on the 18th day of JULY Be it further remembered, the following marriage certificate was filed in my office, to-wit: JAMES PAUL SCHREIER BROWNSBURG , County of HENDRICKS

DENISE LYNN TESTERMAN of HENDRICKS County, State of IN

Official Designation.....

Signed Sonnie

11th day of

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

Dated this 18th day of JULY , 19 81...

WILLIAM A. PAPPANO

State of Indiana, Groom JAMES PAUL SCHREIER

one thousand nine hundred and 81

APPLICATION FOR MARRIAGE LICENSE

File_ 7-16-81

Form Prescribed By Indiana State Board of APPLICATION FOR I	MARRIAGE LICENSE	File	
of 1C 31-1-3-2 HENDRICE		7-16-81	
Effective July 1, 1977		Date of Application	on
1/ 52	FEMALE Medical Examination Report	Dated 7-4-81	
MALE Medical Examination Report Dated 7-4-87	Y	airis m bland	
16 and 1 m Aladou-	Name of Physician	acco m. Heall	4
Name of Physician ACCO THE PAGE OF THE STATE	ever procures the issuance of a license to mar	cy by any false statement, representation	or pretense
ALL QUESTIONS MUST BE ANSWERED. LC, 31-1-3-6 prescribed 1 and states shall be fined in any sum not exceeding five hundred dollars (\$500,00)".	FEMAL	E APPLICANT	
MALE APPLICANT	Name / Afirst	Middlg	Last
Name First Middle Pauxby	Marlene	Day Year	terrin
Panely Day Year	Date of Birth Month	Day Year 1948	2
9 8 1953	Place of Birth (State of foreign country)	themal	
Place of Birth (State of foreign country)	Residence Address Street or R.	City no County /	State 1
Residence Address Box 134 Cateswill Hend Ind	KRI DIX 139	Cracesvelle spende	sed.
- King State of State	Previous Marital Status: Never Married	OR	
Previous Marital Status: Never Married OR Last Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce	Annulment	
Date of birth verified by: Dirth Certificate Judicial Decree	Date of birth verified by: Birth Certificat	Judicial Decree	
	Other (Specify) Oruse	s Leanus	
Other (Specify) Artilles Licensel Mind? No Yes	Are you now or have you ever been adjudge	d to be of unsound mind?	No Yes O
1. Are you now or have you ever been adjudged to be of unsound mind.	If answer is "yes", has the adjudication beer		No□ Yes□
If answer is "yes", has the adjudication been removed.	2. Are you afflicted with a transmissible disea		No Yes O
2. Are you afflicted with a transmissible disease? 3. Are you related to the female applicant closer than second cousin? No Ves	3. Are you related to the male applicant closes	than second cousin?	No Yes 🗆
4. Are you now under the influence of intoxicating liquor? No P Year	4. Are you now under the influence of intoxica		No Yes
5. Are you now under the influence of a narcotic drug?	5. Are you now under the influence of a narco		No Yes D
6. List the full names of any dependent children.	6. List the full names of any dependent childr	èn.	
7. Are you required by any court order or orders to support the above	7. Are you required by any court order or ord	ers to support the above	
dependent children? No Yes	dependent children?		No□ Yes□
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in		plication be accompanied by satisfactory proof	that you are in
compliance with any court order or orders issued for peir support.	compliance with any court order of orders	ssued for their support.	
8. Full name of father Sterrage G. Render	8. Full name of father Creeco	Protonulle Ja	1
Residence of father (if deceased so state)	Residence of father (if deceased so state)	Conspice Sal	и ,
Birthplace of father (State or foreign country) Kentucky	Birthplace of father (State or foreign country	Grellane .	
9. Full maiden name of mother That Mu Frances Getty	9. Full maiden name of mother	the Claine Lim	pelma
Residence of mother (if deceased so state) Won Ind.	Residence of mother (if deceased so state)	Categorille and.	
Birthplace of mother (State or foreign country) Bentucky		India m	
See of ladies	Birthplace of mother (State or foreign countr State of Indiana,	I depose and state the inform	mation given
County of HENDRICKS Bas: I depose and state the information given in this application is true and correct.	County of HENDRICKS	in this application is true	and correct.
Signed & Gade Ranon	Signed X	nande Harris	
New Address RRI BOX 134 contraville In.			7
1/0 (1.0.1.0)		Box 134 Contisville	, 87
Subscribed and sween to before me this day of day of 190	Subscribed and sworn to before me this	day of filly	, 10/
HENDRICKS Circuit Court	Il fary pul Deas	ALL Clerk HENDRICKS	Circuit Court
COVERY OF BUREYES BUREYES OF CHURCH			
CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OF	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 onl	y one parent
aigns, state facts which render the consent of the other parent unnecessary	signs, state facts which render the conse	nt of the other parent unnecessary	******************

State of Indiana,			
County of HENDRICKS ss:	State of Indiana, County of HENDRICKS	} ss:	
Signed	County of TICHORICKS)	
Signed	Signed		Father
Mother	Signed		Mother
Subscribed and sworn to before me this day of	Subscribed and sworn to before me this	day of	, 19
Clerk			Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF			
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been	refused to the above named p	arties, the
A This section is a second section of the second section in the second section is a second section in the second section in the second section is a section in the second section in the second section is a section section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section in the section is a section in the se	ourset has a state of the state	0 100	and filed
authorizes and directs the issuance	or a marriage license to the above na	med parties.	
REIURN OF MADDIACE ATCHASE			
of Indiana dated the day of	nse issued by the clerk of the	HENIDDICKS	rcuit Court
		Al	l and wife
The Water Committee of the Committee of	hand		
one thousand nine hundred and State of Indiana Comments	at consulte	day of Tug	icks
State of Indiana, Groom Randy D. Raisor and, Bride Marlene R. Herrin of	.of	County of	.1
were by me united in marriage as authorized by a marriage license issued for County.		County, State of	
County. County.	that purpose by the Clark, the	County, State of	S
Dated this 22 day of Aug., 19	the Clerk of the Circ	urt Court of DENDRICA	
, 19		, , , , , ,	

Official Designation ..

..Clerk

.. Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority of I.C. 31-1-3-2 Effective July 1, 1977

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

357

TENDRIC	County
MALE Medical Examination Report Dated July 10, 1989	Pote of A 33
	LONALE
Name of Physician Janes Black	Medical Examination Report Dated July 10, 1981
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False state	Name of Physician James Blank
ALL QUESTIONS MUST BE ANSWERED, I.C. 31-1-3-6 prescribed "False statement—Whe shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT	noever procures the issuance of a license to marry by any false states.
First Man.	
Collyony Lopek 19st	Name First
Date of Birth Month Year	Date of Birth Month
Place of Birth (State or foreign country) /952	Day Year
Residence Address, Street or R. By Sity County	Place of Birth (State or foreign country)
Residence Address 10 34 Clifford at Biburg Abust Site	Residence Address Street or R. R. OliCity
Previous Marital Status: Never Married OR	1034 Clefford C. Bourg Shard Steel
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married OR
Date of birth verified by: Birth Certificate Judicial Decree	Last Marriage Ended By: Death Divorce Annulment
Various Laures	Date of birth verified by: Birth Certificate Judicial Decree
Other (Specify) De Courses Science	Other (Specify) Wruses Linguis
1. Are you now or have you ever been adjudged to be of unsound mind? No Yes If answer is "yes", has the adjudication been removed?	1. Are you now or have you ever been adjudged to be of unsound mind?
100 Jes I	If answer is "yes", has the adjudication been removed? No P Yes No P Yes P
10- 10-	2. Are you afflicted with a transmissible disease?
3. Are you related to the female applicant closer than second cousin? No the yes are you now under the influence of intoxicating liquor? No the yes are you now under the influence of intoxicating liquor?	3. Are you related to the male applicant closer than second cousin?
5. Are you now under the influence of a narcotic drug? No Wes U	4. Are you now under the influence of intoxicating liquor?
6. List the full names of any dependent children.	5. Are you now under the influence of a narcotic drug? No Vyes
	6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children?	7. Are you required by any court order or orders to support the above
dependent children? No Yes If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in	dependent children?
compliance with any court order or orders issued for their support.	If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in
8. Full name of father Work Bunjamin Olars	compliance with any court order or orders issued for their support.
Grant to	1 min a margarita
Residence of father (if deceased so state)	Residence of father (if deceased so state) College Corner, Oked
Birthplace of father (State or foreign country)	Birthplace of father (State or foreign country)
9. Full maiden name of mother Seal Lee Moore	9. Full maiden name of mother ada Maxima White
Residence of mother (if deceased so state) Brownspurge and	Residence of mother (if deceased so state) College Corner Blio
111 11/12	Chaliana
Birthplace of mother (State or foreign country) State of Indiana.	Birthplace of mother (State or foreign country). State of Indiana, Indiana
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
& Greamy 1 May	Signed X Oill D. Folds
Signed	
New Address	New Address Dany Cas a saye
Subscribed and sworn to before me this day of July 19.8/.	Subscribed and sworn to before me this day of day of
Mary and Keessell Clerk HENDRICKS Circuit Court	Mary and Cussell Clerk HENDRICKS 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 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	signs, state facts which render the consent of the other parent unnecessary
State of Indiana,	State of Indiana, HENDRICKS } ss:
County of HENDRICKS ss:	Councy
Signed Father	Signed
	Signed Mother
Signed Mother	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of, 19	Subscribed and Clerk
Clerk	
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	and filed ourt by written order issued
HENDRICKS County County	of a marriage license to the above named parties.
authorizes and directs the issuance	WARRIAGE CERTIFICATE UENIDDICKS
TO THE PRINCE LICENS	E AND MILLION
Be It Remembered, there was filed in my office a marriage	authorizing the joining together as hasound
of Indiana dated the 23 day of	
Be it with Greavy J Olar Med in my	hereby certify that on the day of County of County of County State of
I.	hereby certify that on the
One the	at ONES
State of A. State of A. S. State of A. S. State of A. S.	of Hery County, State of
one thousand nine hundred and State of Indiana, Groom Gregory J. Olar and, Bride J. O. E. S.	Hendricks Hendricks
and, Bride of me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court
a ditted in marriage as authorized by a marriage	
Dated this July 19	Signed Six 15t-es
aay oj	Official Design
Filed and recorded in accordance with the laws of the State of Indiana this	day of
	HENDRICKS Circuit Court