



Gc 977.201 M33ma 1940 Oct. pt.9 1960625

REYNOLDS HISTORICAL GENEALOGY COLLECTION



.

•

,

· ·

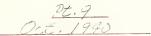
.

4092

MARRIAGE RECORDS

MARION COUNTY, INDIANA

-11



Ministers' Returns

for

the Board of Health

reported to

the Clerk, Circuit Court, Indianapolis, Indiana

• • •

~

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age 1960625 44 color.. 44 occupation_____ " Birthplace-City: State " Residence-Street No. City _ Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father... Maiden name of Mother Bride's name . Her age " color..... occupation " Birthplace-City... State " Residence-Street No. LCity 🖌 Single Widow 2nd or 3rd 1st, marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage... Place of this marriage. Name and title of person Performing this marriage 14 His address. Name Witness Address



1-1 E E C CCT 7-1940 Acc. R. Minger

•

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony n D and Δ Groom's name His age " color... " occupation. State " Birthplace--Citv " Residence-Street No City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Alu Bride's name Her age " color... " occupation " Birthplace-City M State " Residence-Street No. City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother... Date of this marriage. 0 Place of this marriage. Name and title of person Performing this marriage His address 1 Au Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

2

and A Allerene 11 lass Groom's name His age J.Z. 7 e) 64 color..... 44 occupation " Birthplace-City. a State Indiana " Residence-Street No. 214 bit City Indiana Single 1st, 2nd or 3rd marriage Widower RIA Divorced Name of Father. Maiden name of Mother. anes Bride's name Her age color_____ occupation. 46 Birthplace ____State ___ " Residence-Street No. 215 N Citv Single Widow 1st, 2nd or 3rd 0 un marriage Divorced Knes Name of Father. Mal Maiden name of Mother. 04 Date of this marriage. Place of this marriage ... caupter, Name and title of person Performing this marriage erg/4 man Indeansfo His address. Name Witness

LLE E D CCT 72-1940 Parents Attinger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Warnen and Groom's name Warre His age " color... occupation "' State " Birthplaceerenz " Residence—Street No. .City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age h color... " occupation. " Birthplace-State City to " Residence-Street 1 at ...City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother..... e (0)A Date of this marriage. Place of this marriage... Name and title of person R Performing this marriage His address..... Name Witness

P. C. M. H. P. C.

Marriage Record for Board of Health							
To Be Returned by the Minister or Other Person Performing Ceremony							
Joe Hotceler and Ludrig may Bogge							
Groom's name fac Hatsellus							
His age							
" color_wh							
" occupation Ban Jender							
" Birthplace_CityStateState							
" Residence-Street No. 123 & Davidson City In apli							
Single Widower- Divorced							
Name of Father andrew Hotallu							
Maiden name of Mother anna Haspin							
C. I. m. P							
Bride's name Machelf May Dogge							
Her age							
" color wh							
" occupation None							
"Birthplace_CityStateState							
"Residence-Street No. 806 Uddal City Indplo							
Single Widow- Discoursed and the second seco							
Divorced)							
Name of Father <u>crucet Jugmona</u> <u>bogge</u>							
Maiden name of Mother Audaeg Uwan Sunday							
Date of this marriage October 12/1940							
Place of this marriage Lindpli Ind.							
Name and title of person Performing this marriage							
His address 152/28 Court.							
(Name							
Witness { Address							



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

nolo 6 mer and Groom's name His age " color " occupation " Birthplace State City " Residence-Street No City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color..... " occupation. " Birthplace-" Residence—Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage___ Name and title of person Performing this marriage. His address. 11 Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name d His age " color.... ** occupation " Birthplace-Cit " Residence--Street No. Single Widower 1st, 2nd or 3rd marriage Divorced 1 R Name of Father Maiden name of Mother Bride's name Her age " color..... -1 " occupation " Birthplace State " Residence--Street No. City V Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mothe Date of this marriage Place of this marriage. Name and title of person Performing this marriage. U His address Name Witness Address



To Be Returned by the Minister or Other Person Performing Ceremony Eli æ er e Groom's name His age " color. 44 occupation " Birthplace a " Residence-Street No Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. il Bride's name Her age . " color... occupation 66 " Birthplace State " Residence-Street No. nº1 0 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 20 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness

Marriage Record for Board of Health



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony mand Groom's name ... His age " color. " occupation " Birthplace-City State " Residence—Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. 100 Maiden name of Mother. Bride's name . Her age " color.. " occupation... " Birthplace-City. State " Residence-Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father..... Maiden name of Mother. C Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address Name Witness Address

		Mar	ria	ge	Record	f	or Be	oard	of	Health	
То	Be	Returned	by	the	Minister	or	Other	Perso	n Pe	erforming	Ceremony

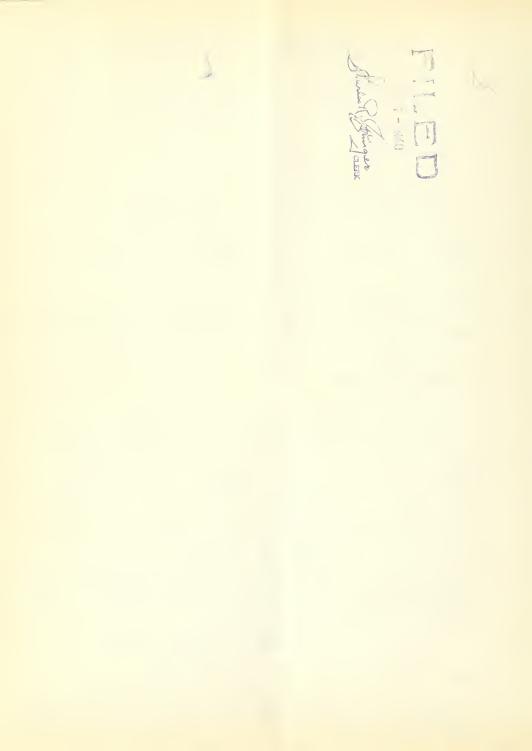
Jonnau B. Brown and Donnas L. Clark
Groom's name Manau & Row
His age
" colorraite
" occupation mul carrier
" Birthplace-City Lenoir City State Jann.
" Residence-Street No. 18 N. Jufferson City Inlangeris
Single Single { 1st, 2nd or 3rd marriage }
Name of Father Hugh Brown
Maiden name of Mother amanda Pirclu
Bride's name Donway L. Clark.
Her age / 7
" color
" occupation
"Birthplace-City Judianafolis State _ Jud
" Residence-Street No. 18. 17. Juffurm City Indernapples
Single Widow Divorced { 1st, 2nd or 3rd marriage }
Name of Father Henry Clark
Maiden name of Mother Juez Smith .
Date of this marriage Octothe Jul. 1940
Place of this marriage Judicaraportis' Judicana Name and title of person Performing this marriage R.M. July July July 1000'
His address. 312 IV. Rettin and
Indranapolis Judiana
Name Robert Orick
Witness { Address <u>9304</u> M M ^{-c} Carty ft

Harris Print

To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age 2 50 " color. " occupation " Birthplaceate in -" Residence-Street N City . Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color. " occupation " Birthplace---City State N 2 fth " Residence-Street No. CitvSingle Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 1940 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Address

Marriage Record for Board of Health

Wm. B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and NUS ne Groom's name His age " color " occupation nou " Birthplace State 006 N " Residence—Street No. City . Single 1st, 2nd or 3rd Widower marriage Divoreed lan Name of Father. 0 9 Maiden name of Mother m Bride's name Her age . " color.... " occupation. "Birthplace—City State " Residence-Street No. 100 City Single Widow 1st, 2nd or 3rd marriage Divorced 2 α Name of Father. Maiden name of Mother 11 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-775

Henlay Minger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony a Groom's name His age .. " color. " occupation. " Birthplace-City " Residence-Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name ... Her age " color.... 00 " occupation. " Birthplace-Cit Cecity " Residence—Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. Date of this marriage..... Place of this marriage.... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and and Groom's name 3 His age .. eas " color_M occupation 10 " " Birthplacetate -City " Residence-Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color_/ 66 occupation al " Birthplace ur State " Residence-Street No City no Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Ũ Date of this marriag Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address Return this Report to County Clerk with License and Certificate

Win B. Burford Printing Co., Indianapolia-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and LA. Groom's name His age _____ " color... " occupation Turwe mai " Birthplace-City 07 State ú " Residence-Street No. pollo Let City S Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father 12 Maiden name of Mother Bride's name Her age 🕰 occupation " Birthplace-City State " Residence-Street No. 2060 dlauGity = Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother... Date of this marriage Place of this marriage Name and title of person Performing this marriage His address. Name . Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

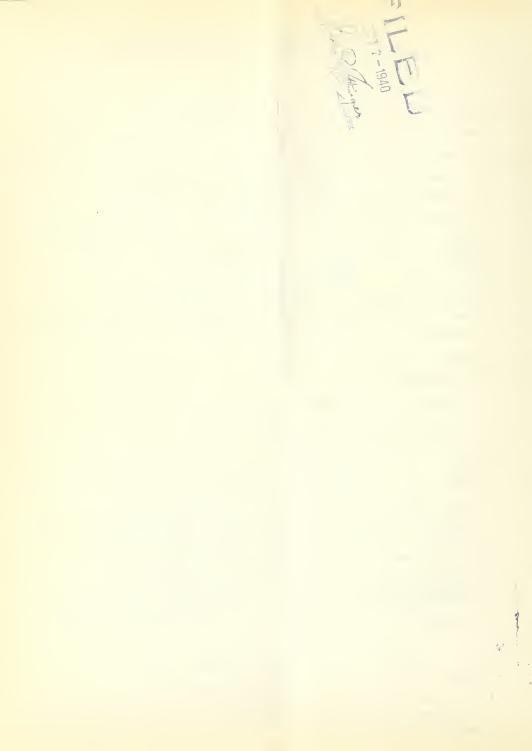
Robert M. 1.3 211 Groom's name 3 His age ... While " color A 00 " occupation " Birthplace Cit Sevel 148 11 " Residence--Street No. City Single Widower 1st. 2nd or 3rd A marriage Divorced Name of Father. In Maiden name of Mother. Bride's name Her age W " color. 0 . 46 occupation neu 66 Birthplace-0 State -City " Residence-Street No. Citv Single Widow h 1st, 2nd or 3rd marriage Divorced Name of Father. 7-1 Maiden name of Mother. ð Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Olen Name Witness Address

Wm. B. Burford Printing Co., Indianapolis--726



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name Lale N. Img
His age
" colork.
" occupation allison Engineering
"Birthplace_City_ Inducina finh State - & Ind
" Residence-Street No. 646 W 30 R City Inclusion for
Single Widower Divorced Suif 1st, 2nd or 3rd marriage 1 1
Name of Father
Maiden name of MotherLillian Leap'
Bride's name Clana Hanb
Her age
" color
" occupation Sallague
" Birthplace-City Indianafalio State And .
" Residence—Street NoCity
Single Widow Divorced Sund [1st, 2nd or 3rd marriage]
Name of Father. atto A Newb.
Maiden name of Mother
Date of this marriage actube 3, 1440
Place of this marriage
Name and title of person Performing this marriage Cappe Phelton, brunste
His address. Indianafrik
Witness { Name Mm Min. John Ring Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age _____ ** color... occupation enn 66 " Birthplace-" Residence-Street No. Single⊬ ∙Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age . " color_ " occupation 210 66 Birthplace State " Residence-Street No. an 10 City Dece Single / Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage... Name and title of person Performing this marriage. His address Name . Witness ddress

A HI H

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age " color. ** occupation State " Birthplace 25 newle " Residence-Tity -Street Single Widower 1st, 2nd or 3rd marriage Divorced X Name of Father. ゝ Maiden name of Mother 0 ne 0 Bride's name Her age . " color. Ż Ζc a (1) n lus " occupation a " Birthplace State 32 " Residence--Street No. Single 1st 2nd or 3rd Widow marriage Divorced Name of Fathe Maiden name of 3 40 rd Date of this marriag 651 Place of this marriage... Name and title of person 15 Performing this marriage. His address Name / Witness Address

TT IL E E

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

1

nurence Monty and Groom's name e His age " color... 44 occupation sines State " Birthplaceline City In Aver " Residence-Street No. 0 Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. n Maiden name of Mother Bride's name ery an n Her age . " color. " occupation. non Birthplace State 🛛 🔾 "" City ___ " Residence-Street No. 29/3 Station Single Widow 1st, 2nd or 3rd marriage Divorced lon Name of Father. d Maiden name of Mother. ul nnings 9 9 0 Date of this marriage. na Place of this marriage. ole Name and title of person 20 Performing this marriage.... His address ... 3 1 Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

aunamarie Routerell and IM Groom's name 3 His age _____ \boldsymbol{a} " color.... occupation " Birthplace--City " Residence-Street No. 302 mest Single Widower 1st, 2nd or 3rd First marriage Divorced Name of Father Maiden name of Mother. ina M Bride's name Her age " color.....) " occupation. " Birthplace-City Inc State " Residence eet No. Single Widow 1st. 2n mat Divorced Name of Father. Maiden name of Mother. Δ Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness ddress



Marriage Record for Board of Health

	-
	2
2	

To Be Returned by the Minister or Other Person Performing Ceremony

Frank Robert Ames and Lillian Elmer Wratten	
Groom's name Frank Robert Ames	
His age46	
" color White	
" occupation Engineer	
"Birthplace_City_ProvidenceStateState	
" Residence—Street No. 2827 E 18th St. City Indianapolis, Ind.	
Single Widower Divorced	
Name of FatherFrank R Ames	
Maiden name of MotherAnna Judson	
Bride's nameLillian Elmer Wratten	
Her age45	
" color White	
" occupationSocial Worker	
Washington "Birthplace-CityDaviesCountyState Indiana	
" Residence—Street No2827 E 18th St Indianapolis	
Single Single 1st, 2nd or 3rd Widow Ist lst Divorced Ist lst	
Name of FatherWilliam B Wrgtten	
Maiden name of MotherRosetta Jackson	
Date of this marriageOctober 3, 1940	
Place of this marriage Christ Erst copal Church, Indianapolis, Ind.	
Name and title of person	
Rector, Christ Episcopal Church, Indianapolis, Ind	0
His address <u>126 E 43rd Street</u> Indianapolis, Ind.	
Name Mrs William E Brennan	
Witness Address 2827 E 18th St., Indianapolis, Ind.	
(Address	

1- L L - 1940 (Ating others 1076 A Changers

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Ola Groom's name His age .. " color.... " occupation ... " Birthplace-State " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father 1 Maiden name of Mother. Bride's name Her age .. " color.. " occupation. " Birthplace--City State " Residence-Street itv Single - Widow 1st, 2nd or 3rd marriage Divorced Name of Father. 16 1 Maiden name of Mother..... Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Lecand Stewis and Herry B 2'ounce
Groom's name Schland S. Asions
His age
" color
" occupation Court
"Birthplace-City. Park the State Just
" Residence-Street No. 1712 North 6 City and Que
Single_ Widower Divorced Ist, 2nd or 3rd marriage
Name of Father David Malare ~ surs
Maiden name of Mother Marry Francis Up JEL man
Bride's name Helan (3 yourname
Her age
" color
" occupation Warn Work
"Birthplace-City Roach Wine State Un Sante
"Residence-Street No. 3242 North 13 City Arminuet
Single Ist, 2nd or 3rd Widow- marriage
Name of Father Edward Munnun
Maiden name of Mother - anin Conday
Date of this marriageHAT HIGHO
Place of this marriage 152/2 & Court . It Name and title of person Performing this marriage and waw & Bruce / P
His address 152/2 E Court St.
Witness Name
Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ho 1an Groom's name His age ... 0 1 " color. 66 occupation " Birthplace City. tato " Residence--Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name C Her age ** color. ¢ 66 occupation " Birthplace-Ma 20 " Residence-Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced in Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address Name Witness 205 0 1 00 ddress



۱.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

-

6	+ c fract	and	1 1 arr
Groom's na	me <u>gier c ci i i</u>		
His age	32		
" color	1. topict		
" occupat	ion and a cha		
" Birthpla	ce-City_danvi	State	Inaug.
" Residenc	e-Street No	City	<u> </u>
Single Widower Divorced		$\left\{\begin{array}{l} 1 \text{st, } 2 \text{nd or } 3 \text{rd} \\ \text{marriage} \end{array}\right.$	}
Name of F	ather <u>A see</u>	<u>- 30</u> 2.03	
Maiden nan	ne of Mother	1	
	ne <u>l'interite de la i</u>		
Her age			
" color		0	
" occupati	ion <u>appiction</u>	<u>n L</u>	
" Birthpla	ce-City	State	unain11
" Residenc	e-Street No. <u>327 Mitch</u>	and City Ca	Unalgenter burg
SingleWidowDivorced		$\left\{\begin{array}{l} \underline{1st.} \text{ 2nd or 3rd} \\ marriage \end{array}\right.$	}
Name of Fa	ather <u>1222</u>	2 Prais	
Maiden nan	ne of Mother	+ din 1	Di ta and
Date of this	s marriage	1 4 7-	n
Name and ti	s marriage <u>Indiana</u> itle of person this marriage <u>Rev</u> .	Lo An	Marian and a company
His address	384 Mikare Most su	1 1 las	
	haianaporia	. Indea	ad
	Name Philman	1 ortw	D.J.M.
Witness {	Address Byowna	outo in	biana.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and etter Groom's name 28 His age ... H. " color. 44 occupatio " Birthplace tate U " Residence-Street No. 1150 Single 1st, 2nd or 3rd 24 Widower marriage Divorced Name of Father Maiden name of Mother asmo Bride's name 25 Her age . " color.... W " occupatio State 44 Birthplace 1058 " Residence--Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced snow Name of Father Maiden name of Mother (9 40 Date of this marriage. 6 1 Place of this marriage. Name and title of person a 3 Performing this marriage. His address Vame Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Lewis Davis and Lyla May Fullen
Groom's name Lewis Davis
His age
" colorWhite
" occupation <u>Jeacher</u>
"Birthplace-City South Bind . State Ind
" Residence—Street No City Jameslown Ind
Single Widower Bingle { 1st, 2nd or 3rd marriage }
Name of Father N. L. Davis
Maiden name of MotherRuth Spellman
Bride's name Lyla May Fuller
Her age
" color White
" occupation Jeacher
"Birthplace-City Indianapolis State Indiana
" Residence-Street No. 6735 Rockville RdCity Indranapolis
Single Widow Divorced Junique { 1st, 2nd or 3rd marriage }
Name of Father J. Slephen Fullen
Maiden name of Mother Bessie brene Ellis
Date of this marriage Oct 4, 1940
Place of this marriage Nest Nashington M. Echurch Indianapolis Ind Name and title of person Performing this marriage Junge Finance Minuster
His address Incleanapolis and 149W 46th St
Witness { Name Proy N. M. Whisler Juy Milobey Address <u>blanville</u> , me Clermont, me
Determ this Depart to Questo Olash with License and Contificate



Marriage Record for Board of Health

51

and
Groom's name "ni i asnung ton and the
His age
" color
" occupation
"Birthplace-City. 7. u. ung in in State
" Residence-Street No. 7 7 7 By SCity
Single Widower Divorced Ist, 2nd or 3rd
Name of Father Interior Ta
Maiden name of Mother. 2:2: 21 21 21 21 21 21 21 21 21 21 21 21 21
Bride's name
Her age
" color. "
" occupation I and
"Birthplace_CityKannyState
"Residence-Street No City City
Single Widow Divorced 1st, 2nd or 3rd marriage
Name of Father
Maiden name of Mother 9 2001 San ama Martin
Date of this marriage C. Two 4 127 - 0 + 2
Place of this marriage Analytic Analytics
His address 1:47 sike and
brach, to not,
(Name 9:
Witness
Address 17733 (11

To Be Returned by the Minister or Other Person Performing Ceremony





Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony			
Frust Peace and Cathermer Filiked			
Groom's name 22 Torust Pene			
His age 2 2			
" colorUhit			
" occupation Clernal			
" Birthplace_City_Crrtun State			
" Residence-Street No. 2154 Statim City Indianapoha			
Single Widower Divorced			
Name of Father Million Viewe			
Maiden name of MotherMuldud Ifum			
Bride's name Cashum Florence Eckel			
Her age 2_0			
" color			
" occupation			
" Birthplace_City_manaputsStateMd.			
" Residence-Street No. 3042 Endra City Andre Ind			
Single Widow Divorced Ist, 2nd or 3rd marriage			
Name of Father			
Maiden name of Mother			
Date of this marriage $rchrhw 4 - 1, 9, 40$			
Place of this marriage Multiplace of this marriage Multiplace marriage Multiplace marriage			
Name and title of person Performing this marriage			
His address 1117 Blame m			
mapis			
Name Nedin Echil			
Witness Address from Kike 3034 M Enclud			

2 1



й и

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

He lu and Mode ham Loran uns Groom's name His age ... " color... " occupation " Birthplaceany State " Residence-Street N Single Widower u 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name . Her age 64 color... occupation 66 " Birthplace-City. State " Residence-Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother..... Date of this marriage ... Place of this marriage. Name and title of person Performing this marriage... His address. re T. Name ... Witness ddress

¢¥

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Krymour and 5 Groom's name His age 66 color. 66 occupation et " Birthplace auab S 11. Vemple Qua " Residence-City -Street Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. -11 Bride's name Her age 66 color 44 M occupation Audias " Birthplace-Martin State City 2 earrow " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced arA Name of Father a Maiden name of Mother gen Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



and Groom's name 7 His age " color.... 66 occupation " Birthplace-State " Residence-Street No. ACity Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age ... " color. " occupation_ " Birthplace-City State " Residence-Street No City ----Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address Return this Report to County Clerk with License and Certificate

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and nerlie 1110 Groom's name His age .. " color. a " occupation " Birthplace " Residence-Street tv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father an US .CA Maiden name of Mother. Bride's name Her age . " color... " occupation. " Birthplace-State " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced n Name of Father har Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness ddress

FIL E- E) 007 7 - 1940 Ares Minger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

XI \varkappa Groom's name His age 66 color... occupation 44 Birthplace State " Residence-Street No. 38 W s. Citv ΓΛ Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father 0 Maiden name of Mother Bride's name Her age " color. occupation " " Birthplace-City Ka State " Residence-Street No. 60 City Single Widow 1st, 2nd or 3rd marriage Divorced-Name of Father Maiden name of Mother. 0 Date of this marriage. Place of this marriage 20 a Name and title of person Mar Performing this marriage... đ His address. Name Witness ddress

a go and a go

Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
Ralph a. McLood and Enric N. Lloyd
Groom's name Rafph U. Michead
His age 471960625
" color. White
"Birthplace-City Calunchers State Sudencea
" Residence-Street No. 4540 Millersodl City Indianapalis
Single Widower Divorced Ist, 2nd or 3rd marriage
Name of Father Laure Renton Macod
Maiden name of Mother Lina 7. Marris
Carrie HI Land
Bride's name <u>Chrred of A Loufa</u>
Her age
" color. Marte
" occupation Registral
" Birthplace-City Mussecliville State Accura
" Residence-Street No. 1434 W. L'elewart City Indeaucopalio Led
Single Widow Divorced Ist, 2nd or 3rd marriage Int.
Name of Father. Fronge E. Hayelett
Maiden name of Mother, Jasephine alaranda
Date of this marriage Oct 4 1940
Place of this marriage 36 M Atacupton drive Andylo Name and title of person a. MMC. Hartinger, Minister
His address. 36 M. Hacupton Dricz Sudpla
Name many Elizabeth Burrow
Witness Address <u>D. 6 3 n. D. law ou Stut</u>



7 1 L ED 0007 7-1840

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Charleath and M. Groom's name His age ... " color. 66 occupation " Birthplace State 10 " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father 120 Maiden name of Mother Bride's name Her age ... " color. as occupation. 64 " Birthplace-City. State 6-" Residence-Street No. City Single 1st, 2nd or 3rd Widow marriage Divorced U. 1 Name of Father Maiden name of Mother. 194 C Date of this marriage Place of this marriage... Name and title of person Performing this marriage. m His address. Name Witness 1×11 Address

T. R. Auger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony war and Groom's name His age " color. " occupation " Birthplace-City tata " Residence—Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother Bride's name Her age "" color... 46 occupation " Birthplace-Rate " Residence-Street N Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. IN Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address.. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony (Bas: f. 0 and Groom's name His age 3 4 " color.. " occupation " Birthplace State " Residence—Street No. .City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name 3 Her age " color... 44 occupation nu " Birthplace--Citv iana .State " Residence-Street No. 10.30 5 Single Widow 1st, 2nd or 3rd marriage Divorced onn Name of Father. Maiden name of Mother C 19410. Date of this marriage Place of this marriage 1015 Name and title of person Performing this marriage Æ as 11 her His address cano Name . Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony men intercas and Groom's name m His age 2 " color. Muto " occupation Atta leris Sern " Birthplace---City. ana State " Residence--Street No. 946 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. л Maiden name of Mother nary 7 Bride's name mar Her age 0 " color..... " occupation ecat " Birthplace-City. State -Street No. 1204 " Residence_ City_ uson Single Widow 1st, 2nd or 3rd marriage Divorced 00 11 Name of Father Maiden name of Mother 5 40 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage r His address. Name Witness Return this Report to County Clerk with License and Certificate

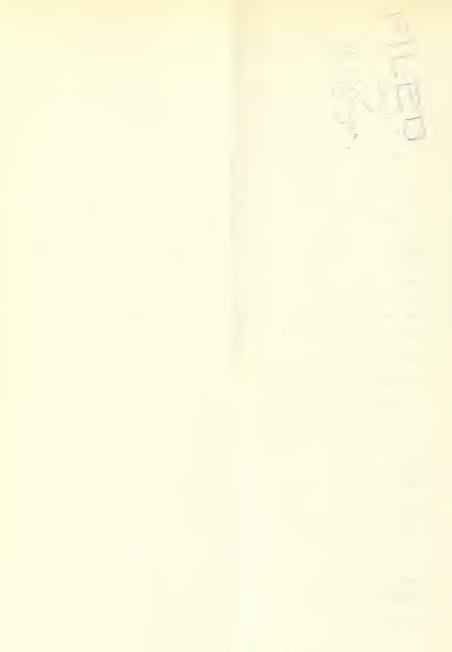
Wm. B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony George in Chris Tham Groom's name 6 His age _____ " color... " occupation. " Birthplace State ___ . Idarl " Residence No. ime Single Widower 1st, 2nd or 3rd 0 marriage Divorced Name of Father Maiden name of Mother. 601 Ú Bride's name Her age ... " color " occupation " Birthplace-State " Residence-.City Single Widow 1st, 2nd or 3rd marriage Divorced 6 Name of Father. Maiden name of Mother Ю Date of this marriage.... Place of this marriage..... Name and title of person ί Performing this marriage. His address. 001 Name Witness ddre Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color.. " occupation " Birthplace-State -City " Residence-Street No. City Single Widower 1st, 2nd or 3rd NON marriage Divorced Name of Father Maiden name of Mother. m Bride's name Her age " color..... 11 " occupation. " Birthplace-City. State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced 1 Name of Father. ac Maiden name of Mother Date of this marriage. la Place of this marriage_ Name and title of person Performing this marriage His address. Name _____ Witness Address 2418

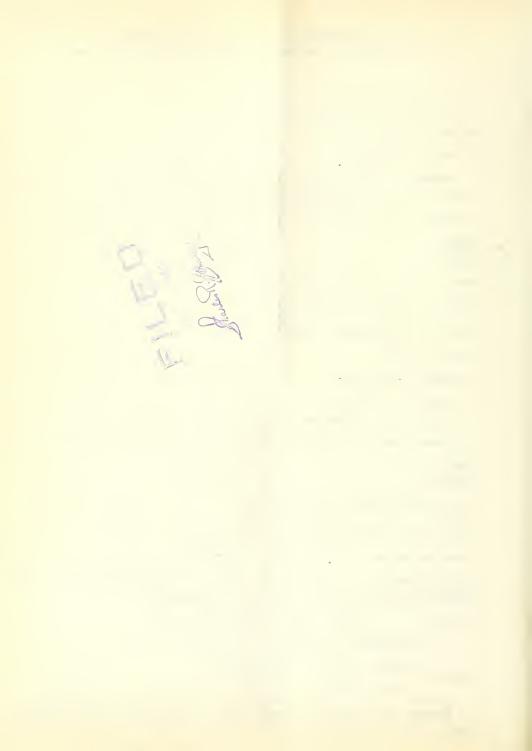


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony in and Groom's name His age " color..... nia " occupation " Birthplace-State " Residence-Street N Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age ... " color... " occupation. " Birthplace-City c tat " Residence-Street N Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Date of this marriage ... Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and m Groom's name His age 2 2 Land " color..... " occupation ing Statio chanapat " Birthplace-City. State "Residence-Street No. \$56 W. 27 ft City ... Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. ma Maiden name of Mother Bride's name ... Her age M. " color..... 44 occupation..... napolis State " Birthplace-–City. V " Residence-Street No. ... City <u>Single</u> Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 0 ma 0 0 -- 1 Date of this marriage. Place of this marriage..... 7 Name and title of person Performing this marriage. ノイ His address. 8 Name Witness Address

Wm B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

42

and
Groom's name Dale E Ruge
His age
" color
" occupation Painter
" Birthplace-City Quelianapet, State Quediana
" Residence-Street No. 1/16 S. Belmant City Indianagali
Single Widower Divorced { (1st, 2nd or 3rd marriage }
Name of Father_ Jahn Burge
Maiden name of Mother. Margarette Bazer
Bride's name Marifrances Dotter
Her age
" colorW
" occupation_ Housework
" Birthplace-City Indianapolis State Reducing
" Residence-Street No. 13055. Shiffield City Indianagrali.
Single Widow Divorced
Name of Father. Herman E. Lattin
Maiden name of Mother. Noyel arthur
Date of this marriage Q. 21. 5, 19.40
Place of this marriage Indianapath, Indiana
Name and title of person Performing this marriage Minieter, Marter H. Jure
His address Indianapoles, tend.
Witness {Name // V. J. M. My Mc Cae Address 1241 J. Belmont avenue.

To Be Returned by the Minister or Other Person Performing Ceremony
Mr. harles Eugene Louden and Martha Lucille Schmidt
Groom's nameC.E.Louden
His age ninteen years
" colorihite
" occupation Painter
"Birthplace-CityIndianapolisStateIndiana
"Residence-Street No. 1867 New Street City Indianapolis
Single Single Ist, 2nd or 3rd Widower marriage First
Name of Father Roland T. Louden
Maiden name of MotherSyble Harlow
Bride's name Martha Lucille Schmidt
Her ageEighteen
" colorhite
" occupation Grey mender
"Birthplace—City_IndianapolisStateIndiana
" Residence-Street No. 1850 Quill St. City Indianarolis
Single Single {1st, 2nd or 3rd First Divorced First Single Single
Name of FatherFerdend.Schmidt
Maiden name of MotherPearl Todd
Date of this marriageOctober 5,1940
Place of this marriage 2151 N. Alabama, Indianapolis Name and title of person Performing this marriage F.E.Thompson, Minister of Religin
His address2151 North Alabama,
Indianapolis
Witness Name Tred & Emrich
Address // 32 fouthern doe

Marriage Record for Board of Health

+ +



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color. " occupation " Birthplace--City tate " Residence-Street No. City Single Widower 1st. and or 3rd marriage Divorced 0 Name of Father Maiden name of Mother. Bride's name Her age " color. " occupation " Birthplace-City " Residence-Street N Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address.. Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 27 and Groom's name 01 His age " color..... " occupation. " Birthplacetate d 6 4 " Residence-Street No. tv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name " color..... " occupation. " Birthplace-State " Residence-Street No. City Single L 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother... 2 21 Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. 36 Name Witness 2 ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis -- 720



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony a a and a a Groom's name His age ... " color. 46 occupationState " Birthplace City ten " Residence-Street No. 403 n. an .Citv Single Widower 1st, 2nd or 3rd marriage Divorced U Name of Father. a Maiden name of Mother ଳ Bride's name Her age W 44 color... 44 occupation. 7 " Birthplace-City. State our 19352 " Residence-Street No. -Single Widow 1st, 2nd or 3rd marriage Divorced-10 Name of Father.... Maiden name of Mother. ი Date of this marriage. Place of this marriage... Name and title of person Performing this marriage... His address Name Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-729



To Be Returned by the Minister or Other Person Performing Ceremony and 1 Groom's name His age " color. ** occupation " Birthplace .State " Residence Street No. Citv vansont Single 1st, 2hd or 3rd al Widower marriage Divorced A Name of Father. Maiden name of Mother. sse andne Bride's name V Her age " color... she ent 44 occupation. nas State ndians " Birthplace-Ci " Residence-Street No. ennington City Single Widow 1st, 2nd or 3nd marriage Divorced A Name of Father. nene Va Maiden name of Mother. Actobe 9 Date of this marriage. Place of this marriage an Name and title of person Performing this marriage 5 His address Name Witness A Address æ

Marriage Record for Board of Health

Wm. B. Burford Printing Co., Indianapolis--710



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 2). Schreiher Groom's name 33 His age . W " color 44 occupation State õ " Birthplace--City " Residence-Street No. /515 Single Widower 1st, 2nd or 3rd S ø marriage Divorced Name of Father ie Fa Maiden name of Mother. W Bride's name 30 Her age " color. " occupation. State " Birthplace--Cit " Residence-Street No. 2003 Single 1st, 2nd or 3rd Widow marriage Divorced 0 Name of Father..... Maiden name of Mother. 196 đ Date of this marriage Place of this marriage. ool Name and title of person Performing this marriage His address Name Witness ddress 0

Wm. B. Burford Printing Co., Indianapolis-779





Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name 25 His age 0 " color. " occupation " Birthplace State 3 5 5 " Residence--Street OCity Single 1st, 2nd or 3rd Widower marriage Divorced Name of Fathe C Maiden name of Mother Bride's name Her age " color. " occupation " Birthplace State A " Residence-Street No. 5260 tv Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. ล Date of this marriage Place of this marriage.... Name and title of person Performing this marriage His address. Name Witness Address

Wm. B. Burford Printing Co., Indianapolis-720



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony tam and EANO Groom's name am His age " color... " occupation. Õ " Birthplace State -City lass mont " Residence—Street No. / City 10 Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father rn uc Maiden name of Mother Bride's name Her age . " color. " occupation " Birthplace-City. M State " Residence-Street No. ... mor City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage.... Name and title of person Performing this marriage His address. Name . Witness Address

- [LE] COT 7 - 1940

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color " occupation int " Birthplace " Residence-Street 1 Single Widower al 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color 46 occupation IM. " Birthplace State -Cit Ar " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address 10 Name Witness 40 ddress

1.2 martinger KI -

٦

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. " occupation State " Birthplace 13 U 9X " Residence Citv Single Widower 1st, 2nd or 3rd 5-e marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age ** color..... 66 occupation " Birthplace-State " Residence Single Widow 1st, 2nd or 3rd marriage Divorced nn Name of Fa 0 Maiden name of Mother 71 40 Date of this marriage \overline{O} Place of this marriage Name and title of person Performing this marriage His address Name Witness Address Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony un and Groom's name His age . " color. " occupation_ 0 State " Birthplace City Wa " Residence—Street No. 60 m City S 1u Single Widower -1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color. " occupation 11 " Birthplace State " Residence-Street City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. 3 440 Date of this marriage_ Place of this marriage... Name and title of person Performing this marriage tu 1 11 His address Name Witness Address

Wm. B. Burford Printing Co., Indianapolis--778



Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
Jawrence Kidwell and Dovolhy Milley
Groom's name Fauvence Kidwell
His age Jwenty Jonn.
" color
" occupation elerk.
"Birthplace_City_Villa Stove_State_State
" Residence-Street No. 1426 to Meridian City Indianapolis Ind
Single Widower Juivorced Single Divorced Juivorced Juivorced Juivorced Juivorced
Name of Father Ungel Kidwell
Maiden name of Mother. Marry Dreenwell.
Bride's name borothy Miller
Her age Jwenly Three
" color while
" occupation factory
"Birthplace_City_ Pipley Chroney State_ Indiana
" Residence_Street No. 22 n. DEnny City_ Indranapolis Ind
Single Widow Divorced } { 1st, 2nd or 3rd marriage }
Name of Father Charles Muller
Maiden name of Mother Roze Kelly
Date of this marriage
Place of this marriage Indianapolis, Ind Name and title of person Performing this marriage Ephrem Muench - Catholic Priest
His address1530 Muion dr
Indianopolis, Jund
Name tlerman Mastlage
Witness Address 2531 to Minidian Indianapolis Ind

A when Withing see

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony PAT Groom's name His age ... 0 " color. " occupation State " Birthplace " Residence eet No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color_ " occupation " Birthplace 1m State 1 " Residence-517 City -Street Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony inkett and oraugh mes Plunket Groom's name His age " color..... " occupation 0 na " Birthplace--City State Th " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother a Bride's name Her age " color... " occupation ra " Birthplacen State -City 3 " Residence-Street No. 140 City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father a Maiden name of Mother. Date of this marriage. 0 Place of this marriage. Name and title of person 1 Performing this marriage. His address. 10 Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-729

ELE COT 7-1940

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and ogent Groom's name 30 His age " color San " occupation 240 " Birthplace--City th 4402 " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced-Wrat Edur M. Wright decease Name of Father. Nuga Maiden name of Mother. Mil Bride's name Her age " color... 44 occupation. en " Birthplaceor City.... State 360 0 " Residence-Street No. d Single Widow 1st, 2nd or 3rd marriage Divorced 11 Name of Father Maiden name of Mother 0 Date of this marriage Place of this marriage. Wa Inchamas Name and title of person Performing this marriage His address anc Name Witness ¥ Ø ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name 🦾 His age " color.. A " occupation " Birthplace State " Residence-Street No City Single Widower 1st. 2nd or 3rd marriage. Divorced Name of Father Maiden name of Mother Bride's name Her age " color. " occupation " Birthplace—City State 73 " Residence-Street No. /. City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-721

FILE CO

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color. " occupation " Birthplace--City tate " Residence-Street No. 4/6 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of M Bride's name Her age " color. 44 occupation " Birthplace-State Cit " Residence—Street No. Single 1st, 2nd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis--728

Larlag . Thinger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony end 1 a Groom's name 6 His age . " color. 46 occupation " Birthplace--Cit S " Residence Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Fat Maiden name of Mother Bride's name Her age 66 color... occupation " Birthplace " Residence-Street N CitvSingle Widow 1st, 2nd or 3rd marriage Divorced 21 Name of Father nel Ta. Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

G. Feldsch m Groom's name J. His age " color... occupation #6 " Birthplace-" Residence-StSingle Widower 3rd 1st. 2nd Divorced Name of Father Maiden name of Mothe MADN Bride's name Her age " color..... 10 " occupation State " Birthplace " Residence-Street No. 12 Single 1st, 2nd or 3rd Widow mari ivorced Name of Father Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Voran and Colloran Groom's name His age " color.... occupation State (" Birthplace-" Residence St Single Widower 1st, 2nd marriage Divorced-0 Name of Father Maiden name of Bride's name Her age . " color. " occupation " Birthplace State " Residence--St Single Widow 1st, 2nd or 8rd marriage Divorced Name of Father oaar Maiden name of Mother Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address. Witness Wer. TAA Return this Report to County Clerk with License and Certificate

THE PARTY OF THE P

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Kill and 1 Groom's name His age " color .. " occupation " Birthplaceas " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. q Bride's name Her age . " color " occupation. " Birthplace-State " Residence-Street No. ...City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. M. Place of this marriage.. Name and title of person Performing this marriage His address Name orde Witness no ddress



Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
Rong, Ralph and Hood, Mary C.
Groom's name Ralph Long
His age
" color. The C
" occupation michanic
"Birthplace-City Surectionates State Tevan
" Residence-Street No. 523 Milabama City Indianapolio Ing
Single Single {1st, 2nd or 3rd Widower Divorced {1st, 2nd or 3rd
Name of Father Roy Long
Maiden name of Mother
Bride's name Mary E. Hood
Her age 20
" color
" occupation Jack randwitch shop.
"Birthplace_City Indianapolic State
" Residence-Street No. 834 College ave City Indianapole
Single Widow Juvorced Single { 1st, 2nd or 3rd marriage } }
Name of Father Carl Hypert
Maiden name of Mother. Cona dee facone.
Date of this marriage Ceck 5 1940
Place of this marriage Indianapolic and Name and title of person Performing this marriage Rev. H.H. Kendall, minich
His address 12/2 Broadway, Indianapolish
Witness Name Man Con Nomm
Address <u>734</u> Callage w

FILE COT 7-1940 Acuer R. Suger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age/ " color. " occupation " Birthplace-State 0 " Residence--Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color. " occupation " Birthplace State " Residence-.City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother..... Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Herbert To Seatt and Sarah Ruh Pritcher G
Dadant to Coast
Groom's name
His age
" colorWhite
" occupation Bayker
"Birthplace_CityLlangStateAlang
"Residence-Street NoCityCity
Single- Widower Divorced } Midawa { 1st, 2nd or 3rd marriage } Account
Name of Father
Maiden name of Mother Manus Juney
Bride's name Sarah Ruhy Pritchard
Her age
" color
" occupation Cemployee of h. C. A.
"Birthplace-City_Cedgarle, State_Ale
" Residence-Street No. 87 1. Brichhillightad Inchangfoli
Single- Widow Divorced } {1st, 2nd or 3rd marriage }
Name of Father Dang to internard
Maiden name of Mother
Date of this marriage 0 Ft. 5, 440
Place of this marriage <u>Ang</u> <u>Ang</u> <u>Ang</u> Name and title of person Performing this marriage <u>Munulan</u>
His address hang, Indrang
Witness { Name ////////////////////////////////////

1-11-1-1940 2017-1940

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Delia mitchell Do and Groom's name mitche His age 26 U " color..... reso 46 occupation ... 2 " Birthplace-City .State " Residence-Street No. 906 Marin auCity Single 1st, 2nd or 3rd marriage Widower Divorced Name of Father. Maiden name of 1× Bride's name . Her age 23 " color. U " occupation " Birthplace and State City 6 " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage.... Name and title of person Performing this marriage His address Name Witness 81

1.6

FILE COT 7-1940 COT 7-1940

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

.... and 9. Williams Groom's name Alton His age " color_____ " occupation Painter " Birthplace-City Indianapolio ndiand State " Residence-Street No. 20427 Tacompity Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Arthur 2 lli Maiden name of Mother. dith 2 V_ Bride's name A Her age 22 " color..... occupation noora her " Birthplace ~ " Residence carn No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 40 Date of this marriage. Place of this marriage.... Name and title of person Performing this marriage His address Name Witness orm



.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 4. Plant \propto and Groom's name His age ... " color... " occupation... " Birthplace " Residence-Street N Single 1st, 2nd or 3rd o Widower marriage Divorced Name of Father. Maiden name of Mother G Bride's name Her age . " color.... 101 66 occupation " Birthplace " Residenceakolis Street No. au Single Widow 1st, 2nd or 3rd st marriage Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address Name Witness Address

70

 $\{ v \}$

•

-3-5

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony A maon UN and u ani ux 20 Groom's name ... His age ... " color.. " occupation why State " Birthplace_ -Citv " Residence-Street No. 102 lan City ____ den Single Widower-1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name man Her age . " color.... " occupation " Birthplace-City State " Residence-Street No. c Citv Single 1st, 2nd or 3rd Widow marriage Divorced MAD Name of Father. 11 Maiden name of Mother. ろ Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address..... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Robert Magell and Mary Isabel Hall
Groom's name Robert Magill
His age 39
" colorWhite
" occupation Electricizion
" Birthplace-City Same, County Untranstate, Incland
" Residence-Street No. 7.718 Marguette and City Chicago, Illinois
Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Name of Father
Maiden name of Mother. Ellen Devenny
Bride's name
Her age 28
" color. White
" occupation Murse
"Birthplace_City_ Indiana Blog Blog State Indiana
" Residence-Street No. R. R. 10, Ray 484 City Indrangfolis, Indran
Single Widow Jury Land Constrained Single Si
Name of FatherCharlesCharlesHall
Maiden name of Mother Rathleen mary Flynn
Date of this marriage October 5, 1942
Place of this marriage ft Matthent Church manapples , Indiana Name and title of person Performing this marriage Run, J. Torlland yoders Brief
His address 31 Campbell ave
Dordlignafolia, Indrano
Name Richard Justij
Witness Address <u>41 So Colorado</u>



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Irod 18/05 W. and Groom's name 0 re His age to " color 44 occupation 66 Birthplace State " Residence Single Widower 1st, 2nd or 3rd Divorced Name of Fathe 0 Maiden name of Mother Bride's name Her age ... " color... occupation 46 State " Birthplace " Residence Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 1940 Date of this marriage. olo Place of this marriage... Name and title of person me mm Performing this marriage.... 34 m Delewar His address.. Name Witness Address



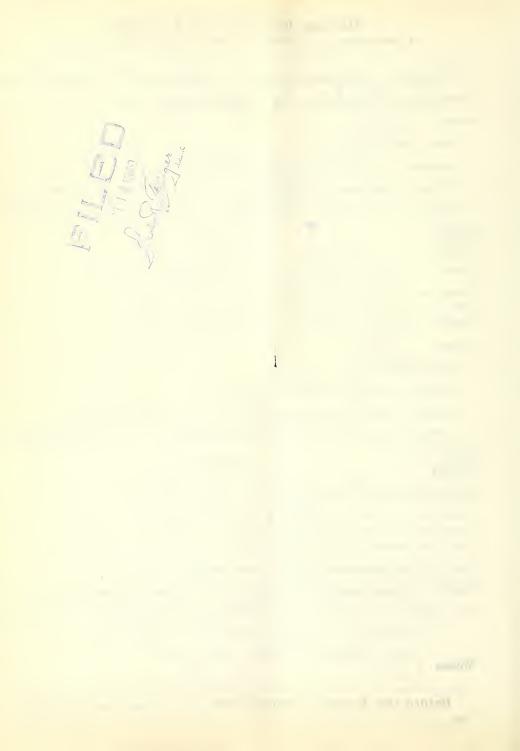
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and (IN 1 x Groom's name 4 His age " color..... " occupation. " Birthplace--Cit State 0 " Residence-Street No. 27 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name 6 Her age " color... " occupation. " Birthplace-City tate " Residence-Street No Citv <u>Single</u> Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 60 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

inder 1

·

•

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony wand All Groom's/hame His age ... " color... " occupation " Birthplace-Ul. S " Residence-Street No. a City _0 Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother. la Bride's name 6 Her age " color...... w " occupation... " Birthplace--City tate 3 2 " Residence-Street No. rs Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother... 2 Date of this marriage. Place of this marriage Name and title of person Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony KEnder and 00 a Laws Ence Groom's name His age . " color. 44 occupation State a " Birthplace—City., Lass E " Residence-Street No. 19 City 🏳 Single 1st, 2nd or 3rd – marriage Divorest 8-1 Name of Father Maiden name of Mother F.F Ŀ a Bride's name Her age " color____ Ery servi occupation 66 State ... " Birthplace-4 ade 132 3 " Residence-Street No. .City . ø Single Widow, 1st, 2nd or 3rd marriage Divorced TEE Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. v His address... Name Witness Qui Address

= 1 =

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Men Goodon Goodwin and Mildand X Frann
Groom's name Mrs Gordon Goodwis
His age 23
" color
" occupation hudr- 20 will Qie 20
" Birthplace-City Manfilia State In gling
" Residence-Street No. 428/26 Marrillity Ludyla
Single Ist, 2nd or 3rd Widower marriage
Name of Father Hal Gordon Foodwern
Maiden name of Mother Butty ann abbott
Bride's name Mildred Matheres Terrans
Her age 24
" color
" occupation Cashier
" Birthplace-City Breach From State Jul
" Residence-Street No. 209. En Month White July as
Single Widow Divorced Single
Name of Father Dames Rulus Estune
Maiden name of Mother Wisher Forhume
Date of this marriage QCT 5 1940
Place of this marriage 15212 & Count St Name and title of person Performing this marriage and row 400 mov 90
His address 1521/2 E Court Strees
(Name C. TH Luit
Witness Address <u>X 4 B 76 5</u>

Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-720



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony A.T. 0 and -Groom's name 2 His age) " color. 64 occupation. " Birthplace-City .K. G " Residence-Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother 10 oren 0 Bride's name Her age ່ດ " color. 0 66 occupation " Birthplace-Citv " Residence—Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 40 X О Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. 3 His address Name Witness Address

ALL LAND the roler

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and 170 Groom's name rer 2 His age . " color. 66 occupation " Birthplace 4034 " Residence-Street No. Citv Single Widowe**r** 1st, 2nd or 3rd 2 marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age 66 color. " occupation " Birthplace-City tate ll 3103 H " Residence-Street No. .City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother 0 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. Δ 13 His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

an m_ and Groom's name loes 34 His age Wh F " color... occupation. " 10. " Birthplaceenda C.O. " Residence-Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother Bride's name Her age ** color... 66 occupation. una " Birthplace te " Residence-Street No. 22 Ćity Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother. Date of this marriage 0 Place of this marriage. au Name and title of person Performing this marriage 0 His address 1 Name Witness Address

Wm. B. Burford Printing Co., Indianapolis--725



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Kather: a 2 nere Groom's name His age Wh " color... 44 occupation " Birthplace-65 an " Residence--Street No. Single 1st, 2nd or 3rd Widowe marriage Divorced_ Name of Father Maiden name of Mother Bride's name 24 Her age " color..... occupation " Birthplace State 0 or " Residence-Street N City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father ND . ma Maiden name of Mother 0 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 36 His address. 00 Name 🧟 Witness Address

FILE E

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Sotella Wille and ou 11 Groom's name His age 35 " color ... occupation 4 66 " Birthplace-City 60. " Residence—Street N City Single Widower 1st, 2nd or 3rd marriage Divorced £L, Name of Father. 110 79 arda Maiden name of Mother Bride's name Her age <u>3</u>/ " color whe 44 occupation. 111 00 as " Birthplace-🛥 State -Citv " Residence-Street No. MouleCity Single 1st, 2nd or 3rd Widow marriage Divorced ha Name of Father. Maiden name of Mother. < 4 Date of this marriage. Place of this marriage.... Name and title of person Performing this marriage His address... 1.21 lar Name Witness 5nd Address 12

Wm. B. Burford Printing Co., Indianapolis-779

ST.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony llin eller and . Keller Groom's name 2 His age ... Ŗ L " color. occupation " Birthplace " Residence -Street No Single Widower 1st, 2nd or mari Divoreed 3 Name of Father 1. Maiden name of Mother Bride's name Her age " color 66 occupation " Birthplace tato " Residence--Street No. Single Widow 1st, 2nd or 3rd Sn marriage Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. CL. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name MA His age _____ " color_W occupation. - 12 " " Birthplace-City State " Residence-Street No. lon Single 1st, 2nd or 3rd m Widower marriage Divorced Name of Father. Maiden name of Mother. ALLI Bride's name Her age ... " color 66 occupation 400 " Birthplace-City. State _ < 01 44.5 " Residence-Street No. 16 City majana Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 6 60 10 4 Date of this marriage. Place of this marriage. The Name and title of person Performing this marriage. His address. Name ... Witness Address

rget

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Grøgm's name His age " color. " occupation " Birthplace State " Residence-Street Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother lu Bride's name Her age " color... " occupation " Birthplace " Residence-Street No nd Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father.... Maiden name of Mother..... Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address Name Witness Address



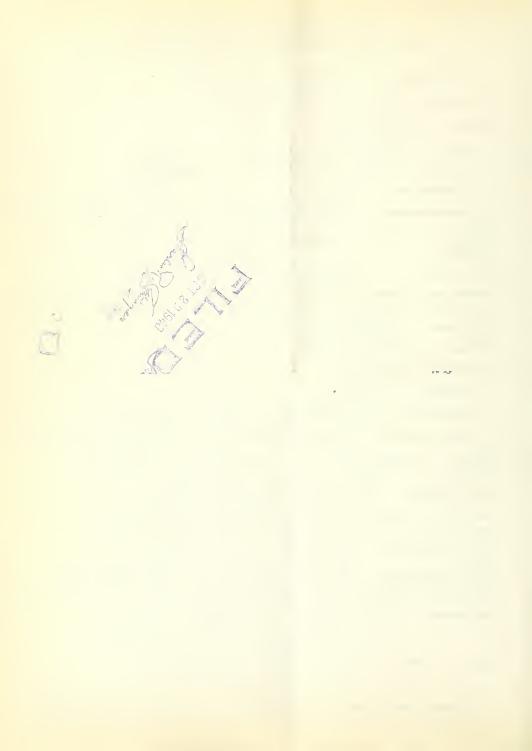
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age _ " color... " occupation " Birthplace--City " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color. " occupation an State " Birthplace " Residence—Street No Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage... Place of this marriage. Name and title of person Performing this marriage. His address. 0 Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1h and / Groom's hame His age " color... " occupation " Birthplace-City. " Residence-Street No Single Widower 1st. 2nd or 3rd Divorced Name of Father. Maiden name of Mother Bride's name . Her age " color..... " occupation ... " Birthplace---City State Lity O " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father.... Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Glaci Min 2.04 and ea Groom's name His age " color. eral 11 " occupation " Birthplace State " Residence--Street City Single Widower 1st, 2nd or 3rd marriage Divorced a. Name of Father Maiden name of Mother rown Bride's name Her age . " color. " occupation " Birthplace tate zam " Residence -Street ...Citv Single Widow 1st, 2nd or 3rd marriage Divorced 1 A Name of Father lus 11 Maiden name of Mother Date of this marriage 1 Place of this marriage... Name and title of person Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1 Groom's name His age . " color. đ *d*0 " occupation S " Birthplace " Residence-Street No. Single Widower 1st, 2nd or 3rd 2 marriage Divorced Name of Father Maiden name of Mother Bride's name Her age .. le " color.. 0 " occupation a " Birthplace-- State " Residence-Street No. 20 lung City Single Widow 1st, 2nd or 3rd 2 marriage Divorced a ø Name of Father. Maiden name of Mother 0 <0 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage a a His address. an 1. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

v

Groom's name Dourady William Banny out
His age 2 2 7
" color White
" occupation clerical
"Birthplace-City_Judianapolis State
" Residence-Street No. 912 11. Grant City Indianafo alis Und.
Single Widower Jungle [1st, 2nd or 3rd'] first
Name of Father Laws J. Baum og art-
Maiden name of Mother Blanche R. nee Tierce
Bride's name Marie Elizabeth Bracking
Her age
" color White
" occupationelerh
"Birthplace-City Judianafalis State Indiana
" Residence Street No. 29 Red genier Dr. City Judian apolis Jud.
Single Widow Divorced List, 2nd or 3rd marriage List, 2nd or 3rd
Maiden name of Mother Marguerite & Mayer
Date of this marriage $O_{4.5.1940}$
Place of this marriage 29 Rid gooien Nr. Judian apolis Jud Name and title of person Performing this marriage Res. Matching
His address. 560 (E. D. Woodmiff Ve.
Sucianspalio, Sud.
(Name Lucifle Brocking), Richard D. Seckler
Witness Address Indianafalia Ind. Whiting Ind.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

.

and
Groom's name Hoy & Curta
His age
" colorwork
" occupation macinist-
" Birthplace-City Inevenworth State Ind
" Residence-Street No. 2633 Southeasterity Indianafolis
Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Name of Father Hoy & Curls
Maiden name of Mother Bullie Kemf
Bride's name Douis 13. Oredon
Her age /
" color ho hits
" occupation Typist
" Birthplace-City_BrokenaltsState
" Residence-Street No. 94/ & Raymond City Infrancefoly 24
Single Widow Divorced { 1st, 2nd or 3rd marriage }
Name of Father Anne Mill
Maiden name of Mother mury n. For
Date of this marriage QC 5 1940
Place of this marriage Indian afolis the
Name and title of person Performing this marriage Ren L. G. Huddleslan
His address 1613 Flelchin av
Induniafilis me
(Name
Witness { Address

.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

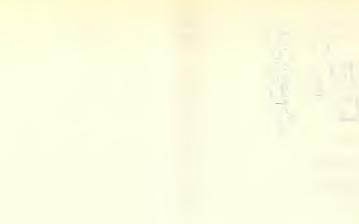
vans and oe. Groom's name sans His age " color.... " occupation " Birthplace-City .State " Residence-Street No. 3/5 . Senate .Citv ama Single 1st, 2nd or 3rd Widower 1 marriage Divorced Name of Father m Maiden name of Mother. Bride's name Her age ... " color. e " occupation the State " Birthplace Street No. 3/5 " Residence-Senate City ... Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage..... Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color..... 0 " occupation " Birthplace-City anotolisState " Residence-Street No. 5 .Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. enn mma Bride's name Her age " color..... " occupation. " Birthplace-City State an 1 " Residence-Street No. City ault Single Widow 1st, 2nd or 3rd marriage Divorced m Name of Father..... Maiden name of Mother. the Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-779



-

-

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

~

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Paul F. Craig and Dorothy Denhart
Groom's name Paul Chang
His age ? Z
" color
" occupation Draftsmon
"Birthplace_City_ AndranapolisState _ Indiana
" Residence-Street No. 3126 Central and City Indianapolis
Single { Widower Divorced } { 1st, 2nd or 3rd marriage } { 1st }
Name of Father George R. Craig
Maiden name of Mother Sophia Christic
Bride's name Dorothy M. Denhart
Her age
" color _ 20 hite
" occupation Stanography
" Birthplace-City At. Joseph State Illinois
"Residence-Street No. 1642 Broadway City Andrenaferly
Single Widow Divorced { 1st, 2nd or 3rd marriage } 2nd
Name of Father Clarence Denhart
Maiden name of Mother Luella Bridgewater
Date of this marriage October 5-th 1940
Place of this marriage Indianopolia Indiana
Name and title of person Lion Weatherman, Christian Minister
His address 522 n. Berwich
Indianapolia, Andrino,
Name Buriels Winhart
Witness Address Address Address

- -



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 and nl Groom's name His age " color.. " occupation State " Birthplace-" Residence--Street N Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color. 66 occupatio " Birthplace ð " Residence--Street No. ٠ Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

	Wm. B.	Burford	Printing	Co.,	Indianapolis	-720
--	--------	---------	----------	------	--------------	------



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Willia D. 00 and Wel Groom's name His age 72 hit. " color ... " occupation " Birthplace-State -City P " Residence—Street No. City Single 1st, 2nd or 3rd Widower marriage Divorced al Name of Father. Maiden name of Mother. ۸ canett. Bride's name Her age . " color..... 66 occupation " Birthplace State " Residence-Street N 9 TO City Single Widow 1st, 2nd or 3rd e marriage Divorced Du rent Name of Father. gue Maiden name of Mother. tober 5 Date of this marriage.. 199 reedi Place of this marriage. van Name and title of person Performing this marriage 1.5 His address. Name Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. ** occupation " Birthplace-State -Citv " Residence—Street No. City Single 1st, 2nd or 3rd Widower 12 ma marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age .. " color. " occupation " Birthplace—City. State " Residence—Street No. City <u>Single</u> Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness

0.761 T R. Anger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Mildred Wa Oscar Butt ecar Groom's name His age ょ 12 0.1 " color... N 44 occupation. anapoli " Birthplace tate Baken " Residence-Street No. Single 1st, 2nd or 3rd Vidower marriage Divorced . Name of Father Maiden name of Mother. Mildred Bride's name ... 25 Her age " color.... " occupation. " Birthplace ana State -Street No. 5221 " Residence--.Single --Widow-1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 20 940 Date of this marriage Place of this marriage. d Name and title of person Performing this marriage ... His address G C Name . Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

dut and-Groom's name His age _____ 44 color. 44 occupation Alan " Birthplace-City State " Residence—Street No.4001 aula City . A Single 1st, 2nd or 8rd Widower marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age . " color.. 44 occupation " Birthplacelin " Residence-Street No. m City ... Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother... 4 Date of this marriage... Place of this marriage.... Name and title of person Performing this marriage His address. 0 Name Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony anthur & Hea and 4Y Groom's name 3 His age . 1 " color " occupation " Birthplace " Residence--Street No. Single Widowor 1st, 2nd or 3rd marriag Divorced Name of Father Maiden name of Mother Bride's name Her age ** color. " occupation " Birthplace State З 5 6 " Residence-Street No. Single Widow-1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Addre

have fittinger LL 1 1940

Marriage Record for Board of Health
Berald To Be Returned by the Minister or Other Person Performing Ceremony
"Jerry" Watson and Emelie Drivin
Groom's name Jerry Watson
His age 26
" colorwhite
" occupation Finate flate line
"Birthplace-CityStateState
" Residence-Street No. 25351 Helanne City Indianapoli
Single Widower Divorced Ist, 2nd or 3rd marriage
Name of Father Scorpe Thomas Watson
Maiden name of Mother Surah Arm Rickson
Bride's name Encle Durin
Her age 2.3
" colorwhite
" occupation billing clerk
"Birthplace_City_ #3 Inchanapolis_ State_Ind.
" Residence-Street No. 43 11 E. Michigan City Indanspoli
Single Widow Dist, 2nd or 3rd
ha hill
Maiden name of Mother May
Date of this marriage Ctobe 5-1940
Place of this marriage Walkice forest Prestyterion Church
Name and title of person Performing this marriage Rev Day E Muelk
His address 4905 E 10 th ft Inclicanapolis
Name Myron T. Watson
Witness Address 6207 Forest Lane,

18%

thinger 2 2

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

a n Ochulles and Groom's name ... in His age _____ " color... 44 occupation " Birthplacele State u City " Residence -Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. ulli Bride's name Her age ** color..... 64 occupation " Birthplace-City An in State mal, Alothe City And " Residence-Street No.330 2 Single Widow 1st, 2nd or 3rd marriage Divorced chull Name of Father. Maiden name of Mother fann No 9 Far Date of this marriage. Place of this marriage.... rl Name and title of person N Performing this marriage h ml 2 His address. £ 1 Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 4 ner 0-24,80 and 1-mi Groom's name His age _____ " color... " occupation State " Birthplace-City rmonCity 11 2 " Residence-Street No. .. Single Widower 1st, 2nd or 3rd marriage Divorced m Name of Father..... Maiden name of Mother. Bride's name ... Her age 20 color ... occupation uno State " Birthplace_City____ and HersonCity " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. it at Date of this marriage... Place of this marriage.... Name and title of person Performing this marriage. His address 4 sau

ins addre	0	Julia		ate a	1 1 0 1 0	
	(Name	1 orcha	m	Aleman	<u>un va</u>	
Witness	Address .	1518	7	ichuism.		
				44		

Return this Report to County Clerk with License and Certificate

"

""

Wm. B. Burford Printing Co., Indianapolis-711



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony a lan and Groom's name ... " color.... " occupation ... State " Birthplace-City. ar ane Ć " Residence-Street No. City . diana Single Widower 1st. 2nd or 3rd a marriage Divorced toto Name of Father itt an Þ Maiden name of Mother... Bride's name and Her age . 7 hil " color... 44 occupation. " Birthplace-City dianap & State lana 6 " Residence-Street No. 320 a 2. City Single 1st, 2nd or 3rd Δ Widow in marriage Divorced Name of Father Maiden name of Mother Date of this marriage ø Place of this marriage Name and title of person Performing this marriage. His address ind Name Witness and OINIA ddress

And and us IL C

and				
Maller Barrisbarry				
2/				
His age				
" color				
" occupation Core-maker-				
"Birthplace-City Hestfuld State Indiana				
" Residence-Street No. R. R. 19 - Box 138 City Indurapolis				
Single Widower Divorced A Cover { Ist, 2nd or 3rd marriage }				
Name of Father Marion Readow Barricknen				
Maiden name of Mother Ella Mae Giltin				
Bride's name Mary Forice Priedrich				
Her age				
" color Ahle-				
" occupation None				
"Birthplace-City Pittsboro State Adrama				
"Residence-Street No. R. R. 19 Box 328 City Brain apolio				
Single Under State				
Divorced Minnie Fiedrick				
m to die 1 78 - bail				
Maiden name of Mother				
Date of this marriage October 5, 1940				
Place of this marriage Indianapoleo, Indiana				
Name and title of person Performing this marriage hus. Joseph V. Somes-				
His address 1827 E. 59ª Street				
Indianapolio, Indiana.				
(Nome James Friedick)				
Witness Name Jane Friedrich Maisapolio				
(AUUI 550				



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Juin Tenholder and Elizabeth Ferry
Groom's name Irin Tenholder &
His age
" color Shite
" occupation Backkeeper
"Birthplace_CityA. LenisStateMo
" Residence-Street No. 310 N. Illinois City Indianapolis
Single Widower Divorced } Aingle { Ist, 2nd or 3rd marriage } / pl Name of Father Pl. Tenholder
Maiden name of Mother_Enma Denninger
Maiden hame of Mother
Bride's name Elzabeth Genn
Her age
" color Mite
" occupation Brokkeeper
"Birthplace-City Greenbastle State Indiana
"Residence-Street No. 103 E. 24th City Indianapolis
Single Widow Divorced Jungle { 1st, 2nd or 3rd marriage } /// Name of Father Philip A. Genn
A C · IC · IA
Maiden name of Mother
Date of this marriage October 5, 1940
Place of this marriage At: phon's Pectory Name and title of person Performing this marriage Processed Pichard C. Gregoria
His address. 126 H. Deorgia St.
Indianapolio, Ind.
Name Carl Kragh 310 n. Verining makes
Witness { Address Viola Guhbalder 1403 1 n. Care Hace.
refe to t

1.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony odaa and . Groom's name His age . " color 66 occupation " Birthplace State " Residence City reet No Single Widower 24 1st, 2nd or 3rd whore marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age ... " color. " occupation. " Birthplace State m 2 5 6 a " Residence-Street No. CitvSingle Widow -1st. 2nd or Srd marriage Divorced Name of Father. n m Maiden name of Mother. 9 40 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name 2 His age ... " color. " occupation " Birthplace State " Residence-Street No. tv Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color. 66 occupation " Birthplace-State " Residence-Street No. 1320 Citv Single Widow 1st, 2nd or 3rd marriage Divoreed Name of Father. Maiden name of Mother 40 Date of this marriage Place of this marriage ... Name and title of person Performing this marriage His address Name Witness 3 2 . O Address



in de

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony CINTED and () Groom's name His age ... " color. " occupation " Birthplace-State -City " Residence-Street North City Single Widower Lst, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. D Bride's name Her age ... " color. " occupation. " Birthplace-City State " Residence-Street 1 Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Address



11/

Ben Selig and Squee Arij
Groom's name Ben Selig
His age21
" color white
" occupation Badio enconnega)
"Birthplace-CitySeimaurStateState
" Residence-Street No. 6237 Park all. City Indianapulin
Single Widower Divorced } { 1st, 2nd or 3rd marriage } { Jinst
Name of Father Nerman & Selig
Maiden name of Mother_Victuria Chapman
Bride's name Larence Ary
Her age 20
" color White
" occupation Hausewark
" Birthplace-City Paule 3, Halton State Indiana)
" Residence-Street No. 795 1 Marningpide City Indinuapalies
Single Widow Divorced } { 1st, 2nd or 3rd marriage }
Name of Father Homer & Ary
Maiden name of Mother Hannah Smith
Date of this marriage
Place of this marriage Haltan, Sydiana, R. R. 3 Name and title of person Performing this marriage Rev. Mushall Maller
His address Route 3, Halton, Jud. ; and 308 Rice
Hall, Southern Baptist Deminory, Lauister, Ky
Name Stanley Selig
Witness Address 3512 N. Bale, Indianapolis, Ind.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony acht Groom's name 0 His age " color.... " occupation " Birthplace-Cit State " Residence-Street No. 6 au. City M.C and Single Widower 1st, 2nd or 3rd marriage Divorced-Name of Father. Maiden name of Mother Bride's name Her age " color..... " occupation... " Birthplace-1 ...State " Residence-Street No. / G Ot L....City Q uch Single Widow 1st, 2nd or 3rdmarriage Divorced Name of Father. an Maiden name of Mother. A 1440 Date of this marriage ... 10. Place of this marriage.... 10 m Name and title of person Performing this marriage int His address 0 6 Name 🗸 Witness Address

All Stages

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Rachh randa and Mayine C. P Groom's name / La His age 3/ color U occupation State Lin " Birthplace " Residence City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother... Bride's name Md Her age 7 " color... tes 44 occupation " Birthplace 18 sat P.State " Residence-Street No. 7 209 ____City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father..... 4 Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



and Raymon Groom's name His age _2/ color M occupation ** " Birthplace tate -Ind " Residence-30 Citv -Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age _____ " color wh " occupation " Birthplace State 31 " Residence-Street No. Single Widow-1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness



and 0 Groom's name His age ... 66 color. " occupation " Birthplace S w UL City " Residence-Street No.3. Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 4 Bride's name Her age " color.. 66 occupation " Birthplace-State -City-" Residence—Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 21 P (0Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address Name Witness ddress



harless. A and du AB Groom's name _____ His age Jugart " color..... 66 occupation. " Birthplace-City. State " Residence--Street No. Indianas City Single Widower 1st, 2nd or 3rd marriage -Divorced Name of Father Maiden name of Mother Bride's name Her age ... " color..... " occupation... 0 " Birthplace—City State en " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced. Name of Father 1 Maiden name of Mother. 940 Date of this marriage. Place of this marriage.4 Name and title of person 4 Performing this marriage... His address Name Witness ddress

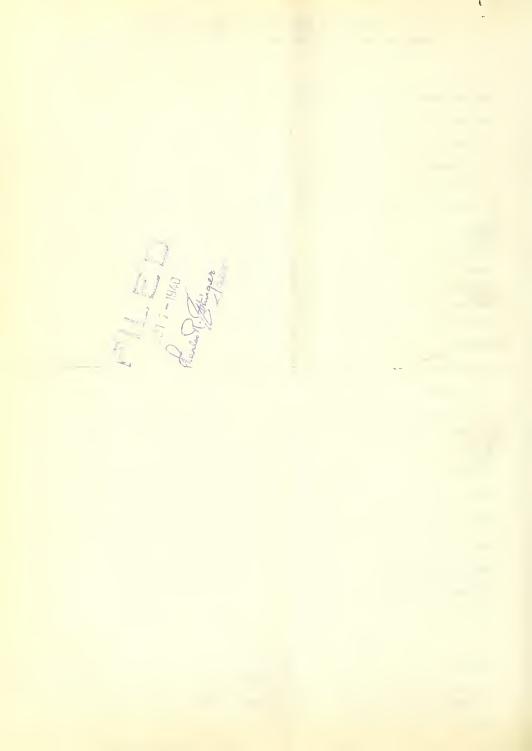


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 15 Martin and Jack am 21 100 Groom's name His age " color... " occupation " Birthplace-City. " Residence--Street N Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Moor Maiden name of Mother Mar ol. C Bride's name ... Her age " color..... " occupation Marce " Birthplace-City.... is State " Residence-Street No. 336 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. 25 Maiden name of Mother. Date of this marriage_ Place of this marriage... Name and title of person Performing this marriage. His address rady 336 Name Witness Address



118

and
Groom's name Lloyd Muman:
His age 9 2
" occupation Barburng
" occupation Danuary g "Birthplace-City Micmi State Manda
" Residence-Street No. 1.3.9 / Alslenzy City Judicin apolis
Single Widower Divorced Ist, 2nd or 3rd
Name of Father Gdward Muman
Maiden name of Mother Celig A cyp
Bride's name Manguerite Custer
Her age
" color
" occupationWailress
" Birthplace-City Chinton State Juliana
" Residence-Street No. 27 N. Highland City Judian apolis
Single Widow Divorced 1st, 2nd or 3rd* marriage
Name of Fatherfastan 4.6 gAll
Maiden name of Mother Muy Jock multi
Date of this marriage
Place of this marriage Name and title of person Performing this marriage
His address
Witness { Name Mrs. R.W. Davis Address 1244 E. Washington St. Indianapalis, Ind.
V



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Thomas N. Neupus and Louis tomes
Groom's name Sarahan 15. 10 augusts
His age
" colorshile.
" occupation Mfacaca
"Birthplace-City Louisyill State Kenlucky
" Residence-Street No 2029 Carvallory City Juck ug Als
Single ⁻ Ist, 2nd or 3rd- marriage
Name of Father Thomas & Cuyno
Maiden name of Mother Adg Vurce
Bride's name Louis Anna
Her age 3 5
" colorhtt
" occupation Armanuf !
"Birthplace_City_Cappand State Judgery
" Residence_Street No 29 Carrolling City Judicupol's
Single Ist, 2nd or 8rd Widow marriage
Name of Father Cours Nebylus"
Maiden name of Mother Villig Writhington "
Date of this marriage
Place of this marriage <u>Judi an apolia</u> Name and title of person Performing this marriage <u>R. E. Langen</u> Munisiu
His address 3131 Park are
Judicius polis. Judi
Witness { Name / tample. / Funder 2029 Carollon Address Fred L. Sanden 2029 Carollon

·"-

-

1 . Altriger T 7 - 1940 D

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

20

and Groom's name His age " color. occupation " Birthplace-Citv tate " Residence--Street No City ndianabo Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age ... " color..... " occupation. " Birthplace--City State " Residence-Street No. m jaugh-.City Single -Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother a 4 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name M n Witness Address

The second

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and love Groom's name His age 2044 color..... w occupation 66 " Birthplace-City..... 1 ate " Residence—Street No. an City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father on Maiden name of Mother. 1 CARA CIN AM. Bride's name Her age " color.... occupation 20 44 " Birthplace-City.... eno an State " Residence—Street No. 📿 4 knon City ra 1 Single 1st, 2nd or 3rd Widow marriage Divorced 0 Name of Father. An \sim Maiden name of Mother. Date of this marriage. 0 Place of this marriage... Name and title of person Performing this marriage His address 11 Name Witness ddress

1 1 2 10

3 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony William and υ Groom's name . 2 His age 66 color 66 occupation State 66 Birthplace " Residence--Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color. " occupation 66 Birthplace tate 2 " Residence--Street N City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and An Groom's name I His age ... 66 color 66 occupation 46 Birthplace City State 3 " Residence--Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced-Name of Father Maiden name of Mother n Bride's name Her age " color.. 44 occupation 44 Birthplace State -Street No3 " Residence-Citv Single Widow 1st, 2nd or 3rd marriage Divorced-Name of Fathe Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

rafer .

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Lind and Groom's name His age 66 color 66 occupation " Birthplace 2. " Residence—Street No. itv Single Widower 1st, 2m marriage Divorced Name of Father Maiden name of Mother Bride's name Her age ... (A) " color__ £6 occupation " Birthplace ate 120 3 " Residence-Street No. w Single 1st, 2nd or 8rd Widow marriage Rivorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. ε. Ő His address mos Name Witness ine ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and li 000 ____ Groom's name His age White " color.... " occupation " Birthplace-City. State " Residence—Street No. 1,WOO City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. =Th Maiden name of Mother. una Ê un Bride's name ... luca 24 Her age " color..... " occupation. attat " Birthplace-City State Th " Residence-Street No. he CitvSingle Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. no 9 40 Date of this marriage... 3 9 Place of this marriage... Name and title of person Performing this marriage. ince 10 His address. Woodu ames Name Witness 733 Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony lean Groom's name C 3 His age " color 66 occupation 66 Birthplace State " Residence—Street N Citv Single Widower or 3rd marriage Divorced-1 Name of Father Maiden name of Mother 1m Bride's name Her age 66 color. 44 occupation " Birthplace-State City T/ " Residence-Street No. 1208 W D City Single 1st, 2nd or 3rd Widow marriage Divorced 4 an Name of Father Maiden name of Mother 1 Date of this marriage 1 Place of this marriage. Name and title of person Performing this marriage D His address hee Name Witness 1 Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Quentin adom and Clarice Redman
Groom's name mentin R. adom
His age
" color White
" occupation foldier
" Birthplace-City Morganfield Hentucky) State Kentucky
" Residence Street No. 97. puj. Harrison City andrawa
Single Widower Divorced } Single { 1st, 2nd or 3rd marriage } ?irst
Name of FatherLenge L. adom
Maiden name of Mother
Bride's name Clarice a. Redman
Her age / 8
" color White
" occupation Student
"Birthplace-City_anderson_State_Andiana
" Residence-Street No. 1620 N. Penneybrina City Indianafolis Indiana
Single Widow Divorced } { 1st, 2nd or 3rd marriage D
Name of Father James 1. Kedman
Maiden name of Mother
Date of this marriage
Place of this marriage <i>Judianafolis</i> , Judiana Name and title of person Performing this marriage <i>Pw. Henry E. Chace</i>
His address
Witness { Name Mary Helen Smith Byron Luty Address 133.9. Offord St. St. Honison chud,
Return this Report to County Clerk with License and Certificate

- - A

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name Henry S. Torrence
His age 2.7
" color White
" occupation Soldier
"Birthplace_City StateState
" Residence-Street No City Fort Hallison
Single Widower Divorced June 11st, 2nd or 3rd 1 st, 2nd or 3rd 1 st.
Name of Father Henry D. Torrence
Maiden name of Mother. Anna Lu hay
Bride's name Augudolyn M. Houston
Her age 2
" color White
" occupation Beautican
"Birthplace-CityLauren State Julians
"Residence-Street No. Rt 12 Box 184 City Indiana polis
Single Widow Divorced Sumply { 1st, 2nd or 3rd marriage }
Name of Father Janus & Houston
Maiden name of Mother Sophia Max Turner.
Pate of this marries Patolys 17 1940
Date of this marriage
Name and title of person The CC / CC / CC
Performing this marriage nuo shupau bha plain
His address. Hon pullion yuuuuu
Name Lowothy I Stifel John J. Stidar:
Witness Address It. Harrison Ind. It. Harrison, Ind.

Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Groom's name G His age 9 " color.... " occupation " Birthplace State in " Residence-Street No. au Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color.... " occupation " Birthplace re State " Residence—Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Fathe Maiden name of Mother Date of this marriage. Place of this marriage... 6 Name and title of person Performing this marriage. C His address Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 and Groom's name His age ... 1 " color. 44 occupation " Birthplace " Residence-Street No. City Single Widower 1st, 2nd or 3rd tim marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color..... " occupation " Birthplace-City State " Residence—Street No.4 m City Single Widow 2 1 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address

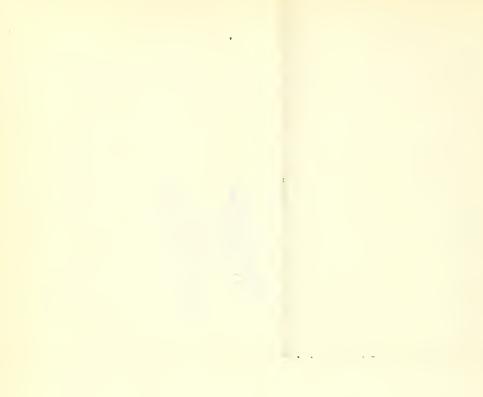
the sper

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Oha anson and Groom's name Wa Jason lter 5 His age " color.... occupation 64 " Birthplace-State 32 " Residence—Street No. 0 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother a -Bride's name Her age .. lite " color_ h artress occupation / 44 7 ndet State " Birthplace " Residence—Street No. 2 on. Time City ma Single Widow 1st, 2nd or-3rd marriage Divorced Name of Father... thur Maiden name of Mother 0 Date of this marriage... Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-728

1.20-1.20-U/J1 1 1 21 -- 1 ł appr.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ludry Servas 1000 neggs and ... dward 1 Groom's name 3 His age to " color.... 61 occupation. nde " Birthplace_ man State -City. " Residence-Street No. Uls .City ...; Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother O dry Win Bride's name Her age 66 color. 66 occupation " Birthplace-City..... < State 1306 " Residence—Street No. . City Single 1st, 2nd or 3rd Widow marriage Divorced 1100 Name of Father A Maiden name of Mother... U.J Date of this marriage... Place of this marriage. Name and title of person Performing this marriage. His address. Name . Witness 0 118 Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ausic and Mildre arence aren mus Groom's name His age 23 inte " color..... nue 44 occupation. 44 Birthplace--City. 5 and " Residence-Street No. 11. .Citv Single Widower 1st. 2nd or 3rd marriage Divorced and nus Name of Father 1 Maiden name of Mother. Bride's name Her age " color... " occupation_____ dist A. n " Birthplace-City State " Residence-Street No. ___City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father 124 Maiden name of Mother. Date of this marriage Place of this marriage... ando Name and title of person Performing this marriage. 11 13 His address. mus - 1 Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age " color 44 occupation " Birthplace ate 6 " Residence Street No. Citv Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age 0 " color. " occupation " Birthplace " Residence-Street No. 44 0 City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother 40 Date of this marriage Place of this marriage... Name and title of person Performing this marriage 0 His address Name Witness ddress

FILE E CO

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and ons Groom's name His age .. " color " occupation " Birthplace " Residence reet N Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age 66 color_ " occupation " Birthplace State Cif " Residence-Street No. Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage J Э Name and title of person Performing this marriage. His address Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony KAON and 🧷 Groom's name His age " color.. 44 occupation 0 66 Birthplace-Citv State " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. u Maiden name of Mother. Bride's name ucu 1and Her age .. " color. " occupation. Birthplace---City "" State " Residence—Street No.4 wast Single 1st; 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage, a His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Sam Kinley and Mary E. Dunn
Groom's name Sam Kinley
11 C
His age 70
" color While
" occupation garage manager
" Birthplace-City dounsville State Kentucky
" Residence-Street No. 131 N. Vermont St City Indianapolis
Single Widower Divorced { 1st, 2nd or 3rd marriage }
Name of Father
Maiden name of Mother May Breek Kunley
Bride's name Mary Ethel Dunn
Her age
" color White
" occupation housewife
"Birthplace-City unectorin State Indiana
" Residence-Street No. 544 N. Delunsis City Indianapolis
Single Widow Divorced { 1st, 2nd or 3rd marriage }
Name of FatherBenjamin Johns
Maiden name of Mother Icy Whitsett Johns
Date of this marriage October 9-1940
Place of this marriage Superior Court, Room 2 Name and title of person Performing this marriage Heibert M. Spencer, Julge Marin Superior Court
His address. 66 The Court Abure, Indianapolis, Ind
Name Erwin Ullery albert Elder
Witness { Address Laurence, Indiana 705 E. St Clay St
Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age u e " color. 44 occupation " Birthplace State Gin 1 din Murhan " Residence—Street No City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age _ " color. Li 66 occupation " Birthplace-Cit State Λ " Residence—Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 640 Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. 4 His address 1 Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

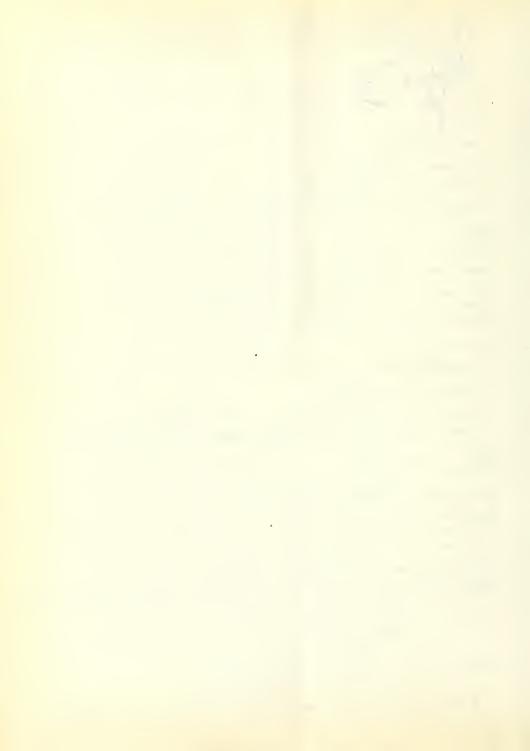
and - duzhd 12Ve Groom's name ... His age 26 " color_// " occupation ... " Birthplace_City Hechok ndana State ___ " Residence-Street No. Lege City . 202 Single Widower 100 1st, 2nd or 3rd ----5 marriage Divorced 20 220 alon Name of Father... 0. Maiden name of Mother. 1203 Indets len Bride's name ... Her age " color occupation 142502 50 " 6 " Birthplace-.....State City____ æ 11/200 14 " Residence-Street No. City Single Widow 0 1st, 2nd or 3rd marriage Divorced 58 Name of Father...... Maiden name of Mother 2 Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. en Name Witness ddress apple

ŕ

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony illia and Groom's name His age _ Z hite " color_____(" occupation susperc State " Birthplace-City " Residence-Street No. 361 City .see Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age2 e la " color..... " occupation 20 Cl State " Birthplace-City " Residence-Street No. .Citv Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. 0 Z Date of this marriage. Place of this marriage Name and title of person Performing this marriage His address ma Name Witness Address

harder Stringer

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Howard Cable and Eve Hopkins.
Groom's name Howdrd Eable
His age
" color. White
" occupation Sales man
"Birthplace-City New castle State Ind.
"Residence-Street No. 2644 Carrollton City Indianapolis
Single Single Ist, 2nd or 3rd Widower Divorced First
Name of Father Ralph Gable
Maiden name of Mother Nellie Huffman
Bride's name Eve Hop Kins
Her age 24
" color White
" occupation Sales lady
"Birthplace-City. Des Moines State Io Ky. d.
"Residence-Street No. 121 S. Haw tharne Laitve Indianapolis
Single Widow Divorced }
Name of Father Elmer Hop Kins
Maiden name of Mother La Id Armes
Date of this marriage. Jotalan 10, 1940
Place of this marriage Judi mapplia, in di ana Name and title of person Performing this marriage your and I hylle, Minister Holden Man Methodist Ch
His address 41.5 H. Westfield Blod
Witness Name Mean Jack
Address 359 Retter and.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

1,28 + and Groom's name ... His age " color " occupation " Birthplace-City. State " Residence-Street No. City _ Single Widower 1st. 2nd or 3rd marriage Divorced Nu Name of Father... Maiden name of Mother. Bride's name . i Her age " color..... " occupation. -----" Birthplace-City.State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced S Name of Father... Maiden name of Mother..... Date of this marriage... Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address

Il Rithere *

Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
Sobert Down McDonald and gladys Law liss
Groom's name Arbert Donn M- Donald
His age Z G
" color_wh
" occupation Preser
"Birthplace_CityStateState
" Residence-Street No. 1215 Prospect City Indplis
Single Widower
Divorced)
Name of Father homas M-donald
Maiden name of Mother Mar Deuroyau Owen
Bride's name gladys Zaw liss
Her age 18
" color_wh
" occupation wattress
"Birthplace_City_IndplisStateAnd.
" Residence-Street No. 537 Flitcher City and
Single Widow } 1st, 2nd or 3rd
Divorced f marriage
Name of Father & auro Stanley & aweers
Maiden name of Mother alga Bundud
Date of this marriage Cctaber 10-th 1940
Place of this marriage Indplis Ind.
Name and title of person Performing this marriage and drew ABruce AP
His address 152/2 Court
(Name
Witness { Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and room's name 3 His age " color. " occupation " Birthplace State " Residence 1 no Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Æ Bride's name Her age .. " color.. " occupation " Birthplace State n " Residence-Street N Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address

L L L L

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Walter Ear and Valle ish Groom's name ... His age . " color. " occupation " Birthplaceraria State Hawl " Residence-Street No. City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother... lar an Bride's name Her age " color.. k ka " occupation " Birthplace_City State " Residence-Street No. 1/ Z Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. U Date of this marriage Place of this marriage /0 / auch Name and title of person Performing this marriage.... His address Name Witness 34 andre Return this Report to County Clerk with License and Certificate

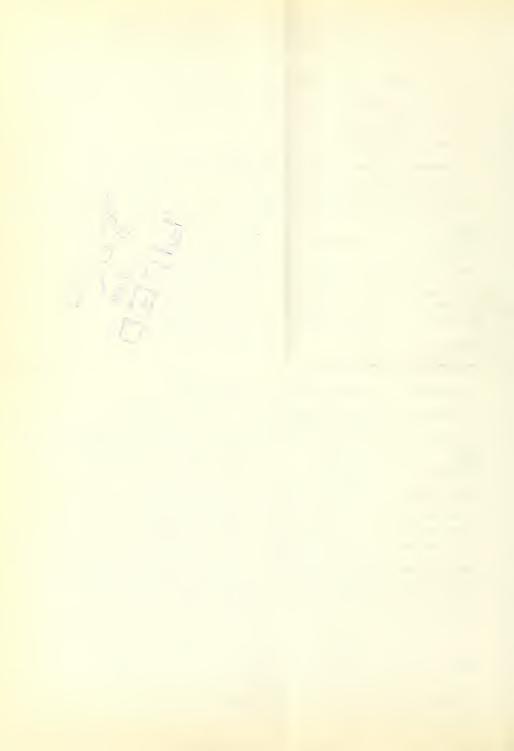
1 gen

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Æ and Groom's name His age " color ... " occupation nec " Birthplace—City apolis State " Residence-Street No. 1422 E. JaborCity ... 1pm Single Widower 1st, 2nd or 3rd marriage Divorced har Name of Father 0 Maiden name of Mother. li l 4.80 Bride's name m Her age .. " color.. C.C.L. " occupation " Birthplace-State -Citv " Residence-Street No. 13 2 Ra City Judia 2 ymond Single Widow 1st. 2nd and marriage Director æ Name of Father. Maiden name of Mother. 22 Date of this marriage 0 Place of this marriage... Name and title of person Performing this marriage. His address Name Witness NE Address

Marriage Record for Board of Health 2^{2} To Be Returned by the Minister or Other Person Performing Ceremony

wan Woolsey and S rothy Reariels Groom's name ______ Qvan Woot His age hite " color..... ber (Package (v ree " occupation ... " Birthplacefammente State ... -Street No. 7.21 6 City " Residence-Single Widower 1st, 2nd or 3rd marriage de Divorced Name of Father... Maiden name of Mother. lea sink oroth 1 Bride's name Her age " color.. chune Operator 66 occupation " Birthplace-Gernaplann State -City... " Residence-Street No. 721 E. Southen an City ____ Single Widow 1st, 2nd or 3rd marriage Divorced 1.9 earch Name of Father Navcd Maiden name of Mother.... Cohouse lober 11, 1940 Date of this marriage. hi buch thurch India Place of this marriage Name and title of person enting D. Performing this marriage The av His address. nota Name . Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-775



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. 66 occupation " Birthplace tate 2803 С " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color.. " occupation " Birthplace State " Residence--Street N Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother 9 40 Date of this marriage. 11 ... Place of this marriage... Name and title of person Performing this marriage 4 6 Ô His address 20 Name Witness Address



222 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age ... " color. " occupation " Birthplace-State City " Residence--Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color... " occupation... " Birthplace-City. State " Residence—Street No. 1236 Citv Single Widow 1st, 2nd or 3rd marriage Divorced 1 Name of Father. Maiden name of Mother 0 Date of this marriage... Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Urightand helon Dalton 1150 La Groom's name . His age 5 " color " occupation -0 ...State " Birthplace Zar " Residence-Street No. City Single Widower 1st. 2nd or 3rdmarriage Divoreed Name of Father Maiden name of Mother Bride's name Her age " color -0 R "" occupatio State " Birthplace " Residence-Street No. //0 lde U a Citv Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother Rac 0 Date of this marriage Place of this marriage..... Name and title of person Performing this marriage His address. Name Witness navanab dia ddres Return this Report to County Clerk with License and Certificate

Win. B. Burford Printing Co., Indianapolis-775



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony t agin and Virginia Jackson Donald Donald Hagin Groom's name ... His age " color PA / occupation_ 44 achanafolis State " Birthplace " Residence_Street No. 50 N. Tacoma Chr City Single Widower 1st, 2nd or 3rd marriage rle Divorced ver alen Name of Father. Maiden name of Mother.... Bride's name Her age ... " color... nograph 44 en occupation. dundfoolis State " Birthplace City. ter an " Residence-Street No.5.3.2.8" Burgess .City Single Widow ∫ 1st, 2nd or 3rd na emarriage Divorced hu Name of Father.... Maiden name of Mother Puly alolen Date of this marriage_ Place of this marriage Name and title of person Performing this marriage 45 His address // Mar ouc ____ instr Name ... Witness Indian of Sin De



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name 3 r His age w " color. " occupation " Birthplace ξ " Residence Street Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color... " occupation " Birthplaceđ. uton City (" Residence-5 -Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 40 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address me Witness G dress Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and $\boldsymbol{\varkappa}$ Groom's name His age ... " color. " occupation " Birthplace-State " Residence-Street No. X City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mothe hre Bride's name Ma C Her age " color... " occupation " Birthplace State " Residence-H .City 🗔 Street No. Single Widow-1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address nu c a Name Witness Address Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony tane Tron Roz redontracc overy and His age " color_____ ttenclan " occupation. Maano " Birthplace-City_ State -Street No. 220 nd .City MA " Residence-Single Widower 1st, 2nd or 3rd marriage Divorced Morve Name of Father. enri Maiden name of Mother. Indenhal Bride's name Her age 0 1. " color... NOACMO " occupation State " Birthplace " Residence Single Widow 1st, 2nd or 3rd marriage Divorced (Ha Name of Father... Maiden name of Mother... al , 11, 1940 Octo Date of this marriage..... Place of this marriage..... Name and title of person No. Performing this marriage. Lamar His address ĕ٨ ma Name ... Witness Address



.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name 6 His age " color ... α eral " occupation " Birthplace State " Residence-Street No.914 G à City . Single Widower 1st, 2nd or 3rd marriage Divorced do 00 Name of Father Maiden name of Mother. Bride's name Her age " color... ٥ 0 Al " occupation " Birthplace-City State 6 " Residence-Street No.7. ۷ 4City Sin**gle** Widow 1st, 2nd or 3rd marriage Divorced . Name of Father Maiden name of Mother 40 Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Ram and ar Il Groom's name His age 2/ whit " color..... manager. atrut -drichs " occupation Ni State ... Pa " Birthplace--City..... 4001 Central " Residence-Street No. ar City Single Widower 1st, 2nd or 3rd marriage Divorced 9 Name of Father. Maiden name of Mother. Rai Bride's name Her age lite " color. al hon " occupation " State Birthplace " Residence-Street No. ... City Single 1st, 2nd or 3rd Widow marriage Divorced ardur Name of Father.... Irla Maiden name of Mother. 940 Deto Date of this marriage..... Place of this marriage... Name and title of person 5. Performing this marriage. His address Name . Witness Address

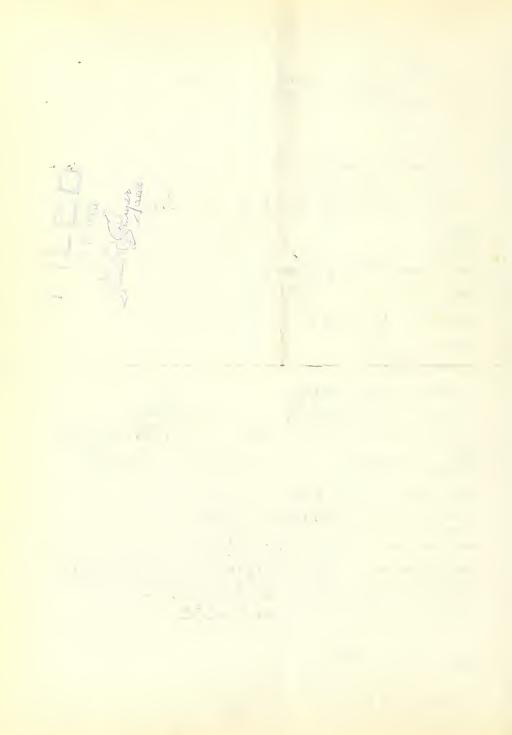
Wm. B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name " color.... " occupation " Birthplace-City State " Residence-Street No. City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. enn Bride's name Her age " color M " occupation. " Birthplace—City State " Residence—Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother a4 0 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Walter and Hanna Re nan Groom's name Matter Vranh Kuni " color... L. D " occupation " Birthplace-Cit State " Residence-Street No.11 Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. M 700 Maiden name of Mother.... madel Bride's name Her age ... " color... " occupation. " Birthplace-City ... State " Residence-Street No. . Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother 1 Date of this marriage. Place of this marriage..... Name and title of person Performing this marriage His address. Name Witness Address



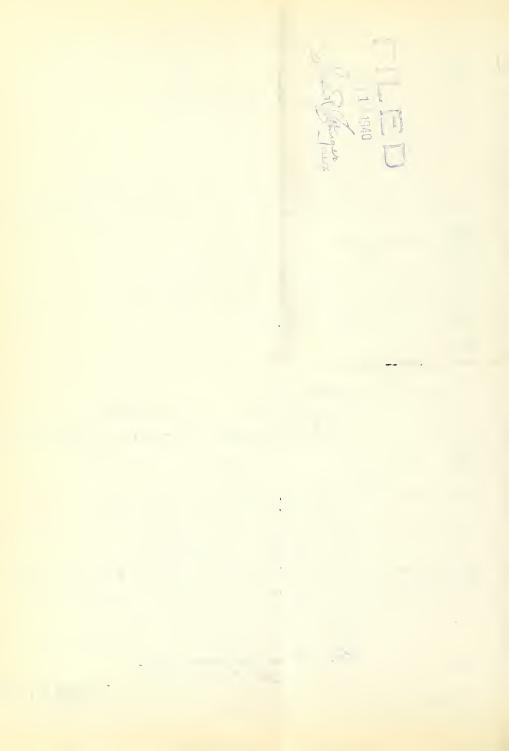
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name ... His age ... " color. " occupation " Birthplace State " Residence----Street No. a City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. wander Mnt Maiden name of Mother. Bride's name Her age " color... " occupation .. State " Birthplace-" Residence—Street No.2.8 Paris ul. City n Single + Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. the Date of this marriage. Place of this marriage.. Name and title of person Performing this marriage. His address Witness Return this Report to County Clerk with License and Certificate

Wm B. Burford Printing Co., Indianapolis-776

ALLE C

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and v. Groom's name His age " color. " occupation " Birthplace State Hawtho " Residence Street Citv Single Widower 1st, 2nd or 3rd 21 marriage Divorced Name of Father (Dra 0 Maiden name of Mother Bride's name Her age . U " color... occupation ** " Birthplace State 1.Beln " Residence City • Single Widow 1st, 2nd or 3rd marriag Divorced Name of Fat Maiden name of Mother Date of this marriage Place of this marriage. and Name and title of person Performing this marriage His address Name Witness Address

Wm. B. Burford Printing Co., Indianapolis-725



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 11.0 lan dred 1% and Archer Groom's name His age 66 color_ 66 occupation 66 Birthplace 21 State 3 City " Residence-0 ave ana Street No. Hanson na Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother_ NOA an Bride's name 00 Her age . 66 color.... " occupation in la " Birthplace State W. New " Residence-Street No. /0 6 n an Single Widow 1st, 2nd or 3rd r marriage Divorced Name of Father. an Maiden name of Mother. 0 Date of this marriage Place of this marriage... Name and title of person Performing this marriage L95. His address. 2 Name . Witness ddress



Marriage Record for E To Be Returned by the Minister or Othe

30	oard	of	Health	
r	Person	Pe	rforming	Ceremony

		Ellen Faulconer				
Groom's name William	Francis Alexander					
His age						
" color White						
" occupation At Allis	cupation At Allison's Enginmering Co.					
" Birthplace—CityFishers	State	Indiana				
" Residence—Street No	City Q	aklandon, Indiana				
Single Widower Divorced	1st, 2nd or 3rd marriage	I First				
Name of Father William Man	Alexander					
Maiden name of MotherM	abel Booth					
Bride's name David Elle	n Faulconer					
Her age 20						
" colorWhite						
" occupation At home						
" Birthplace—CityActon	State _	Indiana				
" Residence—Street No	City	Actòn, Indiana				
Single Single Divorced	1st, 2nd or 3rd marriage	1 }				
Name of FatherFrank Faul	lconer					
Maiden name of Mother	Alline Cayle					
Date of this marriageOctob	ver 11,1940					
Place of this marriage Dunkirk, Indiana Methodist Parsonage Name and title of person Performing this marriage Rev. Harsh W. Mucher						
His address 225 So.Frank	lin St. Dunkirk, Indiana					
	pangler, Beech Grove, Ind	1				
Witness Address Margaret	Williamson, Beech Grove	e,Indiana.				

Sound Renger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony her and Groom's name His age . " color ... " occupation " Birthplace-State -Citv" Residence--Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age . " color. " occupation State " Birthplace " Residence-Street No Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage.... Place of this marriage_ Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Kicha and Groom's name 1. His age 66 color..... occupation 44 Birthpl State " Residence ao Single 1st, 2nd-or 3rd Widower marriage Divorced Name of Father Maiden name of M Bride's name Her age 66 color.. 44 occupation "" Birthplace Jo " Residence-No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother 9 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage 01. His address Name Witness au ddress

jur j

1.1

Marriage Record for Board of Health

To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name ... His age V1 " color..... " occupation. ** Birthplace State ·Citv.... " Residence-Street No. Single. 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age . " color... " occupation " Birthplace State " Residence—Street No Citv -Single Widow_ -1st. 2nd or 3rdmarriage Divorced Name of Father.. Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health

370 To Be Returned by the Minister or Other Person Performing Ceremony

and					
Groom's name Harald & Bauked					
His age 3_3					
" color. White					
" occupation. air Corfs Ruspector					
" Birthplace_City Kndfles State Kndrama					
"Residence-Street No. 28/8 M. Fale St City Indfile lud.					
Single Widower Divorced Ist, 2nd or 3rd					
Name of Father Dawson Farfield Banks					
Maiden name of Mother Mittie Blanvelt					
Bride's name Mina Vay Brawn					
Her age2.5					
" colorwhite					
" occupation Hause kreper					
"Birthplace-City Letana State arkaneas					
" Residence Street No. 115 So. Bradlupity Indeanapolis Ind					
Single Widow Divorced 1st, 2nd or 3rd marriage					
Name of Father John Ahamas Brown					
Maiden name of Mother Gynthia Arances Hicks					
Date of this marriage Helaber 11, 1940					
Place of this marriage 27 M. Bradles st, Midianapulis ned Name and title of person Edward K. Hardy, Minister					
His address 27 N. Bracky street.					
junianogano, ma					
Witness Name Mars. Mathau Birder					
Address 35 no. Cuentral and Chicago II					

Return this Report to County Clerk with License and Certificate Wm. B. Burford Printing Co., Indianapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ran and orance Groom's name His age " color..... nsherler 46 occupation CM " Birthplace Cit State -3 Warr " Residence--Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced 0 Man Name of Fath Maiden name of Mother. arr Bride's name Her age 64 color...... hi occupation enog яa " Birthplacendianah City... State 9610 " Residence--Street No. Leli City .. Single Widow 1st, 2nd or 3rd marr Divorced 21 and Name of Father Maiden name of Mother. 10 Ċ Date of this marriage inna Place of this marriage.. Name and title of person Performing this marriage. on His address Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-726



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

17 د odil ar. and A Groom's name His age 0 " color ... g Rece " occupation " Birthplace-City. State " Residence-Street No. .City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father 10 Maiden name of Mother. ٥ Bride's name Her age . " color. lur 66 occupation State ... " Birthplace " Residence-Street No. City Single Widow 1st, 2nd or 3rd o marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Address Return this Report to County Clerk with License and Certificate

Wm B. Burford Printing Co., Indianapolis--719



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color.... " occupation " Birthplace-State Citv" Residence—Street No.73 City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother. Bride's name Her age . " color..... occupation 66 " Birthplace-State City " Residence-Street No. City . Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. 2 Maiden name of Mother..... 0 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address and 100 à Name Witness ddress innot

Return this Report to County Clerk with License and Certificate

1.000

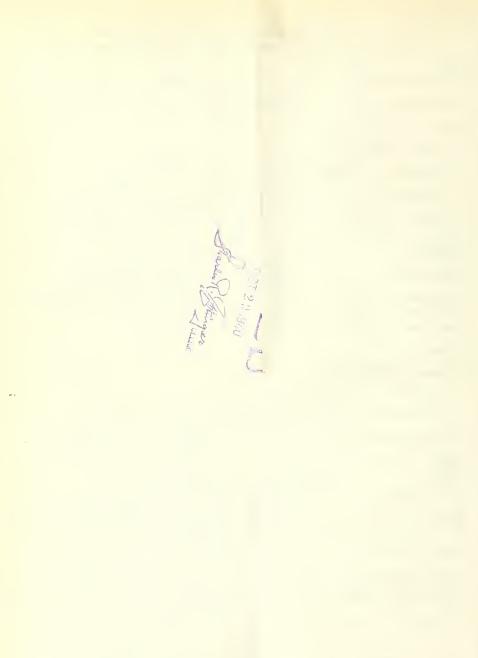


1.000

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony eur and Groom's name His age ... ** color..... 44 occupation " Birthplace State City " Residence-Street N Single Widower or 3rd 2nd 100 marriage Divorced Name of Father. Maiden name of Mother ise. Bride's name 1 Her age . " color... occupation 111 " Birthplace State " Residence--Street No. Single 1st, 2nd or 3rd Winter marriage Diverced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Char _and (Groom's name His age ... " color... an 66 occupation State " Birthplace-" Residence--Street No. an Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother u Bride's name Her age 66 color.... occupation 66 " Birthplace-State " Residence—Street No Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother.... Date of this marriage... Place of this marriage... Name and title of person Performing this marriage His address Name Witness Address



-

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony A Groom's name His age " color ... ٤٢ occupation el " Birthplace-City " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father.... Maiden name of Mother Bride's name Her age " color____/ " occupation " Birthplace-City. State " Residence-Street No. Single Widow 1st, 2nd or 3rd 11 marriage Divorced Name of Father..... Maiden name of Mother. Date of this marriage... Place of this marriage... Name and title of person Performing this marriage His address..... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age ... " color..... " occupation an " Birthplace-.....State ANC-" Residence-Street No. 01 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother... Dier ande K. 0 Bride's name Vear Her age " color Julito occupation Beanty or una 66 State " Birthplace-City Win 1 re Toru 2 "Residence—Street No. 63 8. 23 200 City And 0 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. r au Maiden name of Mother ı d 1.95 Date of this marriage. ELA Place of this marriage // Name and title of person Performing this marriage. m His address.. Name Witness Address Return this Report to County Clerk with License and Certificate

Wm B. Burford Printing Co., Indianapolis-779

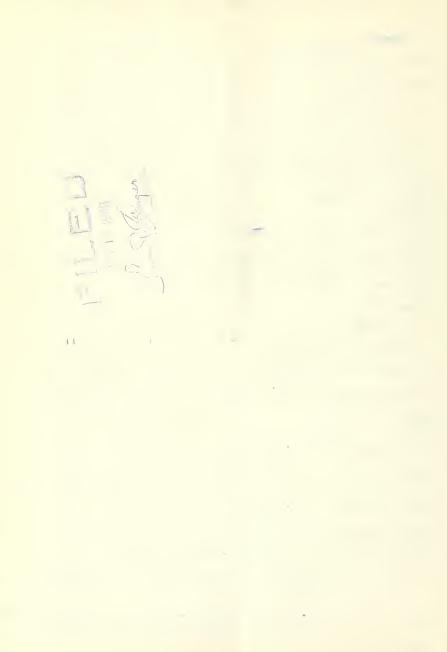


.

Marriage Record for Board of Health

To Be Returned by the Minister or Other Person Performing Ceremony

Hartman Egger and Marjory Andrews					
Groom's name					
24 His age					
" color white					
" occupation student					
"Birthplace-City_HoustonStateTexas					
"Residence-Street No.3347. N.CapitolCityIndianapolis, Ind					
Single Single Widower Ist, 2nd or 3rd Divorced Ist					
Name of Father Henry Donlee Egger					
Maiden name of MotherMyrle_Wright					
Bride's nameMajjory Jane Andrews					
Her age23					
" color_white					
" occupation Billing clerk					
" Birthplace-City.Huntington State Indiana					
919 N.Pennsylvania Indianapolis					
Single single lst					
Divorced Albert E.Andrews					
Maiden name of MotherGrace Winslow					
Date of this marriageOct.12,1940					
Place of this marriage Indianapolis					
Name and title of person Performing this marriageCarleton_W_Atwater_Minister					
His address First Baptist Church, Meridian and Vermont st					
Indianapolis					
Witness { NameMrsand Mrs Albert E.Andrews 919 N.Pennsylvania May Spencer Atwater3345 Ruckle stCity Address					



Marriage Record for Board of Health

2

To Be Returned by the Minister or Other Person Performing Ceremony

Glenn Jarvis and Maxine Horton								
Groom's nameGlenn Jarvis								
His age Twenty-four years								
" colorWhite								
" occupation Office clerk								
" Birthplace-City_ConcordState _North_Carolina								
"Residence-Street No.2445 N.Talbot Ave. City Indianapolis								
Single Single 1st, 2nd or 3rd Widower marriage First								
Name of FatherVern Jarvis								
Maiden name of MotherNyrtle_Jarvis								
Bride's name								
Her age Twenty-four years								
" colorWhite								
" occupation Secretary								
"Birthplace-City_VersaillesState _Indiana								
"Residence—Street No.2340 N.DelawareCity Indianapolis								
Single Single { 1st, 2nd or 3rd marriage First Divorced								
Name of Father								
Maiden name of MotherWilla_Belle_Chandler								
Date of this marriageOctober 12,1940								
Place of this marriageVevay, Indiana								
Name and title of person Performing this marriageRev.Leland_S.Courtney								
His address Vevay, Indiana								
Witness { Name Myra Courtney								
AddressVavay, Indiana								

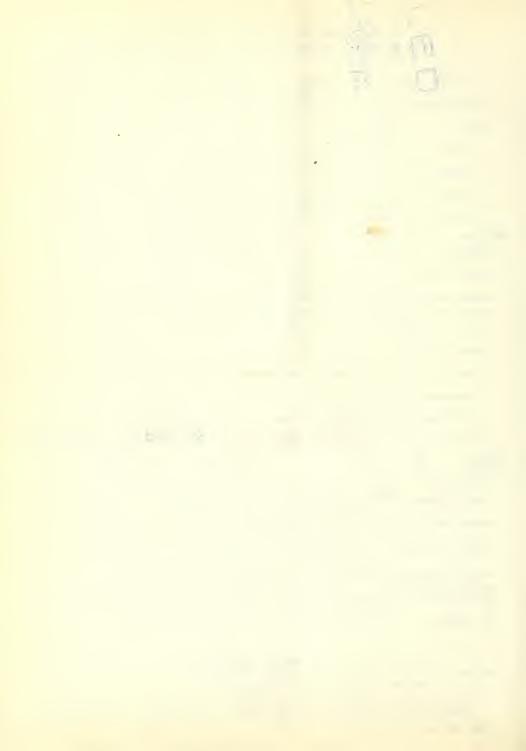
Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-778



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

achi Br and <u>`</u> Groom's name His age ... " color. 44 occupation " Birthplace-State -City " Residence-Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . color " occupati al TL " Birthplace State " Residence-Street No. City Single * 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. Date of this marriage Place of this marriage.... Name and title of person Performing this marriage His address. Name Witness Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color 0 " occupation " Birthplace State " Residence—Street No. Single Widower ∠Divorced nel 1st, 2nd or 3rd marriage Name of Father Maiden name of Mother Bride's name Her age 66 color.. occupatio 66 " Birthplace State OIIP " Residence—Street No. City Single Widow 1st, 2nd or 3rd her marriage ∠_Divorced Name of Father Maiden name of Mot Ď Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

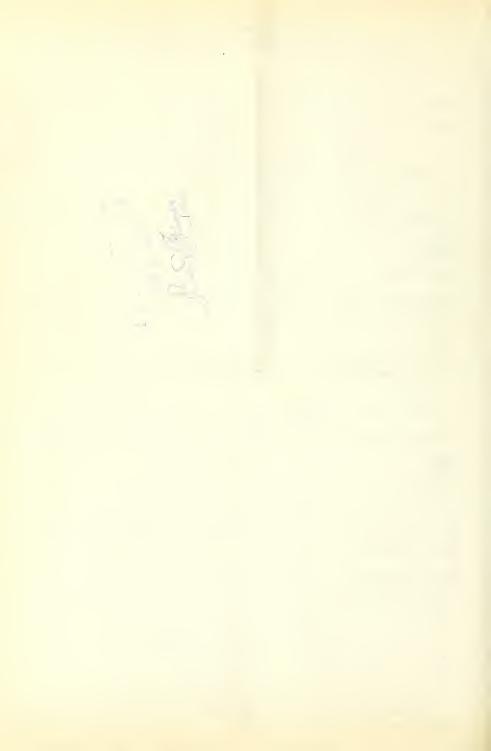


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age ... " color. " occupation " Birthplace State " Residence—Street N City Single Widower X Divorced 1st, 2nd or 3rd marriage Name of Fat Maiden name of Mother Bride's name Her age .. U " color... " occupation " Birthplace State City " Residence--Street No.City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address 0. 0. MO Name Witness ddress/

1.0

Marriage Record for Board of Health							
To Be Returned by the Minister or Other Person Performing Ceremony							
Robert Davic and Flora Raccone							
Groom's name Robert Davis							
His age							
" colorVtite							
" occupation 21. S. Wholesale Co.							
"Birthplace_CityState							
" Residence-Street No. 104/W 38th City Indianglolis, and							
Single Widower Juvored Stringle { 1st, 2nd or 3rd- Divorced } / / / / / / / / / / / / / / / / / /							
Name of Father Laule David							
Maiden name of Mother Charce Johns							
Bride's name <u>Flora Raccone</u>							
Her age							
" color. Itolia							
" occupation							
" Birthplace-City. Indecinafolis State _ Indexina							
" Residence-Street No. // 5 & Danden City Juduna folie Sug							
Single Single { 1st, 2nd or 3rd marriage }							
Name of Father angle France							
Contra Dirat Rici							
Maiden name of Mother							
Date of this marriage October 12, 1940							
Place of this marriage Indianafolic, Indiana Name and title of person Performing this marriage Rev. Haved 14 Hagenfield							
His address 5209 Cast Statto							
Indianapolis Indiana							
Name Clyde Someth							
Witness Address 2131 N. Marris St							



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony thu. care and Groom's name His age _ " color. " occupation " Birthplace-City. State " Residence—Street N 6 City Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color_// U " occupation. " Birthplace-City-State " Residence-Street No. ...City 📉 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. inn Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

S.

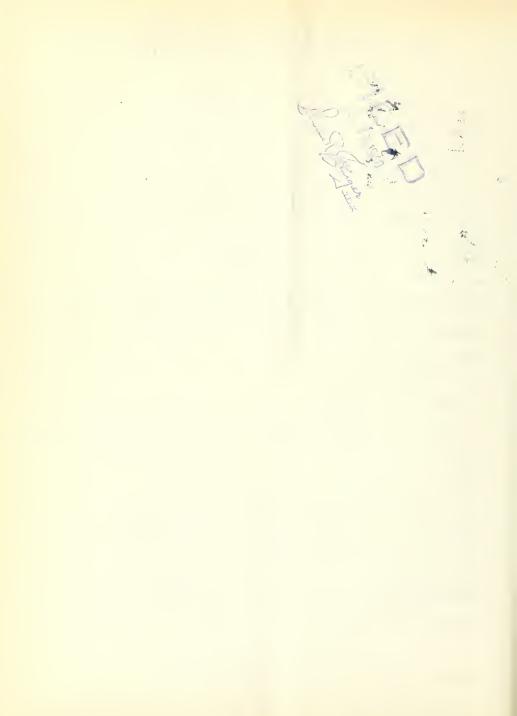
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Groom's name His age ... " color... " occupation " Birthplace-City. State " Residence-Street No. Single 1st. 2nd or 3rd Widower marriage Divorced Name of Father... k Maiden name of Mother Bride's name Her age " color... " occupation " Birthplace no State " Residence-Street No. City . Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 0 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address



Marriage Record for Board of Health

To Be Returned by the Minister or Other Person Performing Ceremony
, ra
and
Groom's name I yman Dale Earton
His age <u>34 yrs</u>
" color_20/fite
" occupation hyperican
"Birthplace-City mdianetolis State Moliana
" Residence-Street No. 1202 W. 3557 City manufolis, Ind
Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Name of Father Pract. Caton
Maiden name of Mother Auba & Freeman
Bride's name Alberta Marie Streicher
Her age 27 yrs
" color White
" occupation & Caches
"Birthplace-City malinne State maliana
" Residence-Street No. 2.3.3.7 N. Del St City Indianofolis My
Single Widow Divorced }
Name of Father John Wm Speicher
Maiden name of Mother Meta M. Lindstallt.
Date of this marriage Oblighter 12,1940
Place of this marriage moderanapolis, hodiana
Name and title of person Performing this marriage Ret. Juseller, Dist. Dupt. Evougelical church
His address 736 2001 Dr. Woodruff Place, Indiana polis, 2001.
PET
Witness { Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony arer and Groom's name ld His age 4 " color... " occupation ner " Birthplace-City. State ia n na 37310 " Residence—Street No. appl Ron City Single 1st, 2nd or 3rd Widower marriage Divorced Hores Name of Father. Maiden name of Mother... Bride's name ... Her age " color..... " occupation... " Birthplace-City State " Residence-Street No. City 1 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother. n Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address

Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony P. Ridonous Robert W. Klois ... and Robert 111, Kler Groom's name 23 His age " color..... (1) co Cler 66 occupation..... anaholis State iana " Birthplace-City..... " Residence-Street No. 2330 Union St. City _____ Single Widower હ 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother 000 Bride's name Her age . color..... occupation Birthplace State Street No. 33 50 " Residence-Single 1st. 2nd Widow marriage Divorced Name of Father..... nov 0 Maiden name of Mother... 940 Date of this marriage 2 Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness die Address

. ...

۲ w² •"

, s

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Umald. mar and Groom's name His age **'**1 " color. " occupation b State " Birthplace is " Residence acom Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of na Mother schner Bride's name Her age " color... 46 occupation Birthplace " State " Residence-Street No. / anabo Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. mm Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address Name Witness ja.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. D 44 occupation " Birthplace a State " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age 73 " color occupation l " Birthplace-" Residence-Street No. 1635 City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father 01 Maiden name of Mother. X C. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address... Name Witness 63 Address and

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony						
Claude L. Bowman and Carrie Warland.						
Groom's name Claude & Bowman.						
His age <u>57</u>						
" color. White						
" occupation Musician						
"Birthplace-City Monrovia State Ind						
" Residence-Street No City Logansport Ind.						
Single Widower Divorced						
Name of Father Leroy Bowman						
Maiden name of Mother. Marley.						
Bride's name Carrie pland.						
Her age $\frac{42}{4}$						
" color_ White						
" occupation House Maid.						
"Birthplace_City_Shildon_State_ll.						
" Residence-Street No. 1108 1/2 Spear St City Logansport,						
Single Widow Widow Ist, 2nd or 3rd Divorced 3rd						
Name of Father						
Maiden name of Mother Sells.						
Date of this marriage Oct. 12 - 1940						
Place of this marriage <i>Indianapolis</i> Name and title of person Performing this marriage O. J. Suhr. Ministr						
His address. R. 20 Bot 89						
Witness { Name I valent Shervill Address 125 W. altrawa St. Logampoil, Ind.						
Return this Report to County Clerk with License and Certificate						

COLUMN DO	Wm.	B.	Burford	Printing	Co.,	Indianapolis-779
-----------	-----	----	---------	----------	------	------------------

T ising

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony inc and INP tis Groom's name His age .. " color.. ** occupation State " Birthplace—City SCity " Residence—Street N Single Widower 1st, 2nd or 3rd Divorced Name of Father Maiden name of Mother. 0 reun Bride's name 07/1 Her age " color... AL 44 occupation " Birthplace-State " Residence-Street No. Single 1st. 2nd or 3rd Widow Divorced Name of Father Maiden name of Mother. a Date of this marriage Place of this marriage. Name and title of person ARA Performing this marriage 1224 His address. đ Name. Witness H. Wa

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1 and Groom's name His age " color... 66 occupation " Birthplace-State City. 0 us " Residence-Street No. City Single -1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother. Bride's name / Her age " color... 66 occupation " Birthplace—City... State " Residence-Street No. City Single -Widow 0 1st, 2nd or 3rd marriage Divorced Name of Father L Maiden name of Mother 11 Date of this marriage Place of this marriage ... Name and title of person Performing this marriage His address. 11-0-Name Witness Address

Wm. B. Burford Printing Co., Indianapolis-779

20%

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age 29 de " color... Cash occupation ... ** 11 " Birthplace-City. ound State " Residence—Street No. Corrective City Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age _____2 " color..... occupation ... 11 " Birthplace-City tate nes " Residence-Street No. . 2 Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father..... Maiden name of Mother ð Date of this marriage Place of this marriage. Name and title of person Performing this marriage • His address 0 N n Name . Witness 11 Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

30

and uchan Groom's name 2 His age 68 color. 66 occupation " Birthplace-Citv Belin " Residence-Street N Single Widew 1st, 2nd or marriag -Divorced Name of Father. Maiden name of Mother Bride's name . Her age _____ " color.... " occupation " Birthplacetatā Cit " Residence-Street N single "Ist, 2nd or 3rd Hidow marriage Divorced Name of Father ON. Maiden name of Mother. Date of this marriage... dru Place of this marriage Name and title of person Performing this marriage. ane His address. 11 Name Witness ar Address m



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 in N and hereker IT Joul Groom's name 10 100 His age n 66 color..... "" occupation_____ 2 dusState " Birthplace-.City " Residence-Street No. / City Single 1st, 2nd or 3rd Widower marriage Divorced tele Name of Father Maiden name of Mother... Bride's name ... Her age " color..... -m " occupation ... " Birthplace-City. State apri andar " Residence—Street No. / City ... - deduarde Single 1st, 2nd or 3rd Widow marriage Divorced 1 Name of Father. nu Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address..... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 00 and _ L Groom's name . His age lu 66 color. " occupation. " Birthplace-City State " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name . Her age " color. occupation. " Birthplace-City State " Residence-Street No City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Addres Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-728



2 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony an and ma Groom's name 40 His age ω 66 color. " occupation " Birthplace-State City. City " Residence--Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother queer Bride's name Her age 66 color... 66 occupation 44 Birthplace 2.State 0. " Residence 1.City Street N Single Widow -1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address a Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name 5 His age " color..... " occupation " Birthplace-City.... State " Residence—Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age . " color... " occupation " Birthplace-City. DU State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced 0 Name of Father. U Maiden name of Mother 12 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

235

Donald N. Illars and Fillion Elin Sephie
Groom's name Donald Silges
His age <u>26</u>
" color White
" occupation Machinest
" Birthplace-City allangia State Judicina
" Residence-Street No. <u>Gion City</u> City Indiana polis
Single Widower Divorced Ist, 2nd or 3rd marriage
Name of Father Ernest & Allacs
Maiden name of Mother. Mard Hunder
Bride's name Lillion other collegies
Her age 2.0
" color While
" occupation Robert
"Birthplace-City Horse Cane State / Yay'
" Residence-Street No. 2. 1.2. Marchan City Indianapplis
Single Widow Divorced } { 1st, 2nd or 3rd- marriage }
Name of Father chard seffus
Maiden name of Mother Manuale Thomas
Date of this marriage 0.12, 19.4.0
Place of this marriage <u>Managenetic</u> Name and title of person Performing this marriage <u>M.C. Call Municip</u>
His address 1510 Cast 12 Strat
Indianepolio, ind.
Name <u>Tillen Lunder</u>
Witness { Address 519 M. hutur



Marriage Record for Board of Health 7 To Be Returned by the Minister or Other Person Performing Ceremony

236

Countrand Riffle and Mar	gery Feezel
Groom's name Countland Mulalis	1 1 0 -
His age 2 6	
" color White	•
" occupation Paymentin York	- A
"Birthplace_City_ Jadraightis_State	Andrea
" Residence-Street No. 1033 # 35th City	Indianaplis
Single Widower Single Single Single	}
Lavorceu J A a 2 1	J
Name of Father. Of Thinks	/
Maiden name of Mother	lensaer
Bride's name Margery Jeegel	
Her age 2 0	
" colorMhite	
" occupation	- Δ
" Birthplace_City advantagets State	Indiana
"Residence-Street No. 5417 E. 16th M City	-drangft
Single Widow Divorced	}
Name of Father Scar Feegel	
Maiden name of Mother Police Filler	
Date of this marriage Orthur 12, 19	KO
Place of this marriage Garhadal Pin	ling
Name and title of person General Charles -	Rus
His address 1347 n. min	lign
Indranapoli	, Andrena.
Name Jer Juito	Ulma Smill
Witness Address 5716 E. 38th	5716 E. 3 8th A.



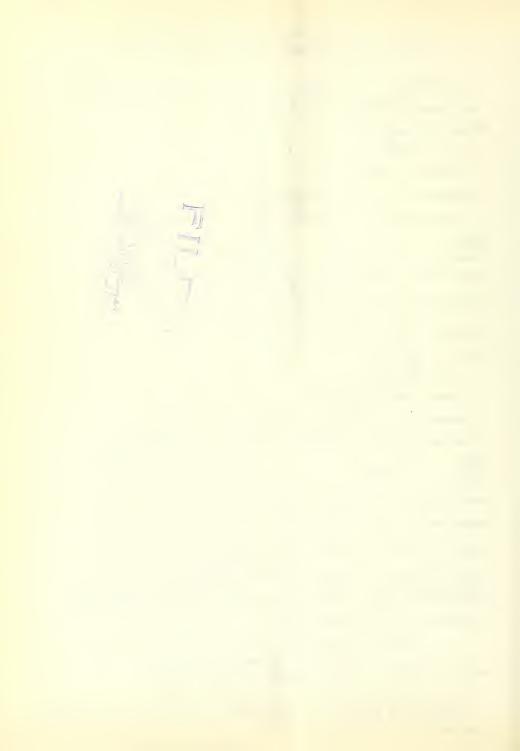
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony to la 20 ignet dealer 00 Groom's name His age " color.... " occupation " Birthplace State " Residence-Street No. ongi TGity Single Widowe 1st, 2nd or 3rd marriage Divorced ٥ Name of Father Maiden name of Mother 0 Bride's name Her age " color ... D 44 occupation " Birthplace-State " Residence-Street N City Single 1st, 2nd or 3rd Widow marri Divorced Name of Fathe Maiden name of Mother 40 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Nan Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Rut urges Groom's name His age " color..... " occupation. an " Birthplace-City Columbus State " Residence-Street No. 1:28 M. Vera ng. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father..... au Maiden name of Mother..... 18,000 Bride's name Nurgeos. Her age _____/ 9 " color hile " occupation " Birthplace-City Mine State dent sles " Residence_Street No. Doolo7 RB apolio. City India Single Widow 1st, 2nd or 3rd ----marriage Divorced Name of Father Winalds. Irour Maiden name of Mother Lula Henry. ot. Date of this marriage..... Place of this marriage_____ Name and title of person Performing this marriage. His address. an Name Witness Address

20



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Mart Harry (Groom's name His age twen ZU. " color..... " occupation stitcher lisnapolis State 🚞 " Birthplace---City " Residence-Street No. 1408 Dudley City . Single Widower 1st, 2nd or 3rd marriage 12 Divorced Name of Father. Maiden name of Mother the Ja Inullia me Ina Bride's name . At Her age " color whe " occupation stenope apolis State " Birthplace-" Residence-Street No. 203 do. Ritter City Ind 0 Single 1st, 2nd or 3rd marriage la Widow Divorced Imeal R. mullis 6 Name of Father____ In Maiden name of Mother Sat. - Oct. 12, 1940 Date of this marriage..... Edge Place of this marriage..... Name and title of person Performing this marriage..... 1540 His address..... man E a Name Witness 52 ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

n 4 -

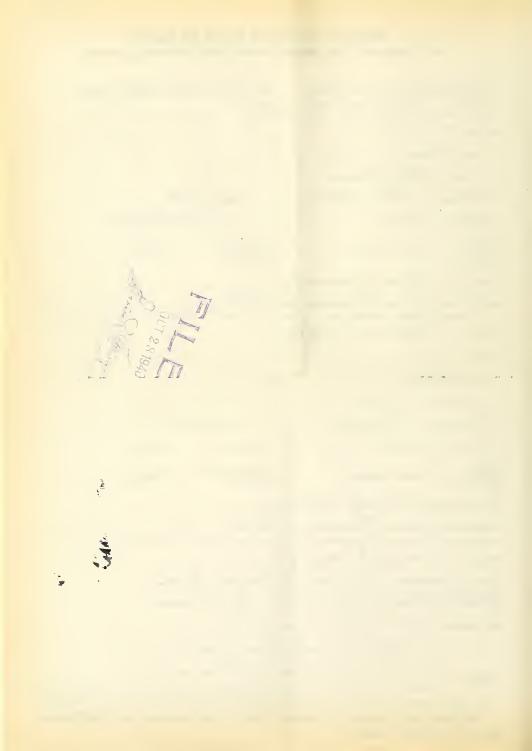
Armsted Elkin and mary Sucille Juffey-
Groom's name armsted Elkins
His age 2 . 6
" color
" occupation
"Birthplace-CityFourswilleStateKentucky
" Residence-Street No. 509 Blue Ridge City Indianapolia
Single Widower Divorced List, 2nd or 3rd anriage List, 2nd or 3rd Ist, 2nd or 3rd Marriage List, 2nd or 3rd Marriage List, 2nd or 3rd anriage List
Maiden name of MotherBlancheManty
Bride's name Mary Excelle Juffey
Her age 20
" color White
" occupation Clerk
"Birthplace_City_ContamonthStateChio
" Residence-Street No. 5/4/ Maple Lane City Indiana folio
Single Widow Divorced } {1st, 2nd or 3rd marriage }
Name of Father Chester C, Juffey
Maiden name of MotheralithaMilstead
Date of this marriage October 12, 1540
Place of this marriage ft. Mattleus church 25 So. Retter Induanafold's In Name and title of person Performing this marriage Ber : J. Unilland yodu, Pailet
His address 31 Campbell ave
Ingliging foles Deschard
Witness Name Alifer Mufley
Address Ad



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and asur Groom's name ... His age 2.5 " color_white " occupation Shy pour IN K nilles State In " Birthplace-City. " Residence-Street No. 1001 n. D.d. .City ... Undply. 21 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father... sw in la Maiden name of Mother. Ľ lon Bride's name x 8 Her age " color.... " occupation war un " Birthplacecen State City " Residence—Street No. 1318 n. mu. City Single 1st, 2nd or 3rd PI Widow marriage Divorced 8 2 Name of Father. Maiden name of Mother. 40 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Laboutte. Grindle and Luci agette Grindle Groom's name Ka His age 3/ " color Maker occupation lore 66 Rurceton " Birthplace-City. State Und South Beng " Residence-Street No. City Single Widow**er** Divorced 1st, 2nd or 3rd marriage Name of Father. Maiden name of Mother. Bride's name Luce Her age 29 " color Whe ** occupation. " Birthplace-City Juck State C " Residence-Street No. City Single Wid**o**w 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage act. 40 bo Place of this marriage... Name and title of person er Performing this marriage. His address..... Name Witness Address



242

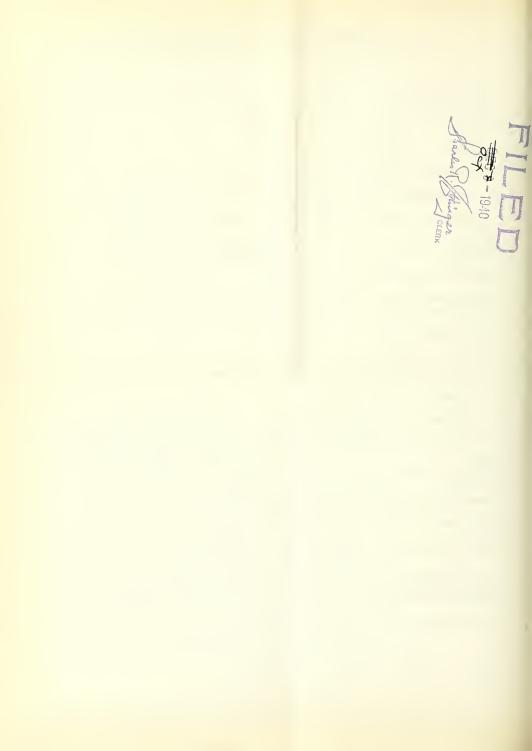
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Groom's name Hilton Bruce Doolittle
His age 22
" color Shite
" occupation Laborer
" Birthplace-City leonnersville State Ind
" Residence-Street No. 2845 Henthrope City Indian apolis
Single Widower Divorced List, 2nd or 3rd marriage List
Name of Father Rev. George a. Doolittle
Maiden name of Mother anna blio Estation.
Bride's name Lois Plagense
Her age 2/
" color thile-
" occupation
" Birthplace-City Harden kilig State S. Dak
" Residence-Street No. 26 45 Hiltsope City Oudianspolis
Single Widow Single { 1st, 2nd or 3rd marriage }
Name of Father Opecan Plagens
Maiden name of Mother May Hilthell
Date of this marriage. Oct. 12, 1940
Place of this marriage Indianapolio, Such Name and title of person Performing this marriage. Rev. R. a. Mc Cauce
His address 234 N. Del.
Indianapolis, Ind.
Name Roy Jant
Witness Address 873 ND avidson t

•

Marriage Record for Board of Health						
To Be Returned by the Minister or Other Person Performing Ceremony						
Lawrence Crice and Dora Wample						
Groom's name <u>Lawrence Cruci</u>						
His age <u>48</u>						
" color White						
" occupation Cafe Owner						
"Birthplace-City trankford State Induana						
" Residence-Street No. 210 26 Wash. City Frankfort						
Single Widower Divorced 1st, 2nd or 3rd marriage Jecond						
Name of Father David Unice						
Maiden name of Mother America Moore						
De Ulanthe						
Bride's name Dora Wamptu						
Her age						
" color White						
" occupation Waiturs						
"Birthplace-City Bambudge State Inchaina						
" Residence Street No1502 firing to, We City Indianapolis Inch						
Single Widow Divorced {1st, 2nd or 3rd marriage						
Divorced) att lub he						
Name of Father and Warn put						
Maiden name of Mother. Ova Cielly						
Date of this marriage Getter 12, 1940						
Place of this marriage Scottsburg, Induana Name and title of person Performing this marriage C. J. Herved, Minister						
His address 239 W. Wardell						
Scottsburg, Inchana						
Name Roy E. O fout						
Witness { Address Louisville) 24						

A O



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Innin) and m N. Lou Groom's name His age/ " color " occupation reenfi " Birthplace-State City "Residence—Street No. 11337. his_City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father oh Maiden name of Mother. Bride's name Her age 66 color. ce Kuper 66 occupation " Birthplace-State "Residence-Street No. /237 N. uple City Single 1st, 2nd or 3rd Widow marriage Divorced Ala Name of Father. Maiden name of Mother... Vot 40 12. Date of this marriage... Place of this marriage..... Name and title of person Performing this marriage Act His address. Name Witness Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color. " occupation " Birthplace State 0 " Residence--Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Fath Maiden name of Mother Bride's name Her age . " color. " occupation " Birthplace State " Residence-Street No. City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother 0 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 30 ک His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age 2 " color ... " occupation ... State " Birthplace--Ci 2011 " Residence--Street 1 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father A Maiden name of Mother. Bride's name Her age . " color.. " occupation ... " Birthplace-City State " Residence—Street No. City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address. Coldan Name ... Witness ddress Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

. and mer E Wray Groom's name ... His age 22 " color Wh " occupation... " Birthplace State " Residence—Street No. City Single Widower Sin 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mothe Bride's name Her age " color... " occupation n " Birthplace-City " Residence-Street Single 1st. 2nd or 3rd Widow mam Divorced Name of Father. Maiden name of Mother.... table 12,1940 C 0 N Date of this marriage. 1. n Place of this marriage... Name and title of person ames a Performing this marriage..... His address. NANDA Name . Witness Address Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health

To 1	Be Returned	by the Mi	nister or Otl	her Person	Performing	Ceremony	
							
	. A R			(m	na-to.	. Shelt	1
um	$\mathcal{I} \mathcal{Q}$	ugner	and	22 inthe	Tonny	, sour	2
	main	0.0	Busher				
name	1 aria	n a. l	Sugner	e /			

Mar m Groom's name His age . " color... 66 occupation ... " Birthplace anapolis State Indiana 3434 W. Idianapol " Residence-City 🔙 -Street No. Single Widower 1st, 2nd or 3rd First Sinal marriage Divorced-Name of Father. Maiden name of Mother montee л Bride's name Her age _____24 whit " color..... occupation Secretary 66 Indianapol State " Birthplace--City_s is 65 0 liver live. City ... " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 1940 Date of this marriage ú Place of this marriage. Ch Name and title of person Performing this marriage. Ch. d His address. iana í nap 1 Name . Witness 3 Address /

TL

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony eter Groom's name ... Ø 241 His age " color ... " occupation " Birthplace-City. " Residence-City . -Street No. Single 1st. 2nd or 3rd Widower marriage Divorced IN Name of Father Maiden name of Mother Bride's name ł ears Her age ... " color... ust. 66 occupation " Birthplace-City_ No State Inve " Residence-Street No. Citv Single Widow 1st. 2nd or 2rd marriage Divorced Name of Father. Maiden name of Mother 01 Date of this marriage Place of this marriage 211 in hru Name and title of person Performing this marriage His address. Name Witness ddress

د. ,

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and unca Groom's name His age .. un. 0 " color. 0 occupation 44 " Birthplace State " Residence Street. No. Single 1st, 2nd Widower Divorced Name of Father Maiden name of Mother Bride's name Her age " color.. " occupation. " Birthplace State Ċ Street No. 261 " Residence-City Single 1st, 2nd or 3rd-Video marriage Divorced Name of Father. in a Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address. 8 0 Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony tant ran tra Grodm's nam His age . Inte " color. 8 nik 1 ms 44 occupation " Birthplace-City State " Residence—Street No. Single 1st, 2nd or 3rd Widower marriage Divorced nn A Name of Father Maiden name of Mothe Unn Bride's name Her age ... NA " color.. " occupation " Birthplace-State ns " Residence-Street No. . .City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Than Date of this marriage Place of this marriage... Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony France rer and 10 Groom's name ane His age ... " color..... CC " occupation State " Birthplace—City...... " Residence—Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color... ** occupation " Birthplace-.Ci " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father... m Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name Mehin II Lie
His age O
" color
" occupation Eli Lelly plant
"Birthplace_City_JulianslinState
" Residence-Street No. 4302 Collige City Indianopoli
Single Widower Divorced Ist, 2nd or 3rd
Name of Father Welliein Kunny Lee
Maiden name of Mother
Bride's name Janet Marie Judd
Her age
" color
" occupation Hause
"Birthplace-City. For Cincinali State Ohin
" Residence-Street No. 4147 Boulevard R. City Quilianaveli
Single
Name of Father Anner E. Judiof
Maiden name of Mother Mattle B. Scheid
Date of this marriage Oct. 12 th 1940
Place of this marriage Andranapalis, Such
Name and title of person Minister Hester N. Derec
His address Juliananeter, Red
Name Amer E Judel
Witness Address <u>H147</u> Burbuard Place

Return this Report to County Clerk with License and Certificate Wm. B. Burford Printing Co., Indianapolis-779

DEC 2 6 1940 franko P. Mining or

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Charles Rectel and Catherine Rose Tunkel
Groom's name Charles Reckel
His age 2.4
" colorwhite
" occupationfarmer
"Birthplace_City_ Indianapolis State_ Indiana
" Residence_Street No City Mooresville, Inf.
Single Single { 1st, 2nd or 3rd marriage }
Name of Father John Keckel
Maiden name of MotherRuch Cook
Bride's name Catherine Rose Functed
Her age 2 /
" colorwhile
" occupation house - work
"Birthplace_City_Indianapolis State_Indiana
" Residence-Street No. 1662 So. Union City Andianapolis, Inf.
Single Widow Divorced } { 1st, 2nd or 3rd marriage } {
Name of Father George Kurkel
Maiden name of Mother Cecelia Fint
Date of this marriage October 12, 1940
Place of this marriage Indiana poly fudiana Name and title of person Performing this marriage Rev. Michael Henning An
His address
His address 1530 Union St. O Indianapolis, Indiana

7 2 Juliers

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and rou Groom's name His age " color. " occupation. " Birthplace-Citv " Residence-Street No Citv n Single 1st, 2nd or 3rd Widower marriage Divorced Name of Fathe Maiden name of Mot Bride's name Her age " color ... " occupation. " Birthplace-State raid -City 5W.ale " Residence--Street No. ...City ... N Single Widow 1st. 2nd or 3rd marr Divorced Name of Father Maiden name of Mother. Date of this marriage Place of this marriage / (2.2 Name and title of person Performing this marriage. His address Name _ Witness ddress



Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
John D. Lanahan and Clanica Ready
Groom's name de D. Sonalan
His age 3 2
" color
" occupation /2 and Telling
"Birthplace-City Andracefic State Andree
"Residence-Street No. 111E.1122 CityCity
Single { 1st, 2nd or 3rd - }
Divoreed f marriage
Name of Father Daniel Jonals
Maiden name of Mother
Bride's name <u>clanica</u> Ready
Her age
" color
" occupation Registered Junse
"Birthplace-CityComessilleStatefalian
"Residence-Street No. /// 2. / 18 26 City
Single Widow
Divorced marriage
Name of Father heady
Maiden name of Mother May Habin
Date of this marriage Ortaha 12, 1940
Place of this marriage
Name and title of person Performing this marriage Renned Jan 9. Hully
His address 1347 A. Mindian U.
Adranapali, Jackson
Name Boluand Miller Mary Harman
Witness { Address 1936 N. alabama Jimble, Ky

J. J. J.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony . Welsh and l Groom's name His age ... " color ... " occupation State " Birthplace " Residence City S Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mo Bride's name Her age . " color. " occupation " Birthplace-State " Residence—Street No. .City .. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness ddres 80

and Chorre

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 11 and Groom's name His age " color. ** occupation 66 Birthplace " Residence--Street Single Widower 1st, 2nd or 3rd marriage Divorced Name of Fathe Maiden name of Mother Bride's name Her age ... " color... " occupation " Birthplace 12 " Residence-Street No. 0 12011 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage 1 Place of this marriage. Name and title of person Performing this marriage 10 His address Name Witness cana pa



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

191

and
Groom's name William WEBEN
His age 2 3 yrs
" color
" occupationfrbbury
"Birthplace-City Indianapolio State State
"Residence-Street No1626 Kelly City Lidence polis
Single Widower Jury Constrained State State Strained State S
Name of Father Mullian Maber Ar
Maiden name of Mother Cleanor Bater
Bride's name Bernice Fourt
Her age 19 - 47.
" color While
" occupation
"Birthplace_City_/ Coro State Luch.
"Residence-Street No. 1316 E. Jabor City Judianopolis
Single Widow Divorced List, 2nd or 3rd marriage List, 2nd or 3rd
Name of Father Hagty Jourt
Maiden name of Mother. Dory Near
Data of this manning Artoban 12 1940
Date of this marriage
Place of this marriage finded up the find. Name and title of person Performing this marriage P. TP. Grover, Minister
His address. 762 N. Relleview
Witness { Name Bernard Quelley Address 1626 C. Helly Street, Indepo. Snd.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

12

Seyfried and Korthans
Groom's name albert beyfried
His age wenty - two
" color
" occupation
"Birthplace-CityfudianapolisStateAndiana
" Residence-Street No 150 g Uhim City Andionapolis
Single Widower Divorced R L is and or 3rd Just
Name of Fatherhilip derfred
Maiden name of Mother Koze Wornsing
Bride's name Marine Korthans
Her age Jwenty - two
" color Vrhite
" occupation Unk
" Birthplace-City Richmond State _ Lordiana
" Residence-Street No. 1232 Blaine City Indianapolis
Single Widow Divorced } {1st, 2nd or 3rd marriage }
Name of Father Centhary Fritz Korthans
Maiden name of Mother
Date of this marriage Ort 12, 940
Place of this marriage baund I beart Church, Endunapolis and Name and title of person Performing this marriage Rev. David Fochtman Cartolie Criet
His address
fordinapolis and
Witness [Name Charles Ruhtn
Witness { Address ford anapolis & ford.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

-2

John sterry Scheidker and Verma & Schwier
Groom's name John Henry Scheidher
His age 29 Jrs
" color
" occupationClerk
"Birthplace-City Hamilal State Mar.
" Residence-Street No. 2410 Callege City Anaiance for aligned
Single Widower Divorced Name of Father Marciage Lit, 2nd or 2rd marriage Lit, 2nd or 2rd Lit, 2nd or 2rd Li
Name of Father
Maiden name of Mother
Bride's name Virna &. Solucier
Her age 7 6 7 23.
" color Le hicz
" occupation Tip dusurance againt
" Birthplace-City Indiana polis State Andiana
" Residence-Street No. 230 n aneural City Sudian apacis
Single Widow Divorced } <u>piccage</u> { 1st, 2nd or 3rd marriage } <u>first</u>
Name of FatherGeorge C. Schwier
Maiden name of Mother
Date of this marriage
Place of this marriage duck are apolicis duck.
Name and title of person J. O. Matthics Postor
His address 560 E. D. Waveruff Pl.
Arianapolis, Ind.
Name 9. A. Ti Climan
Witness Address 2209 Broadway, Januba The

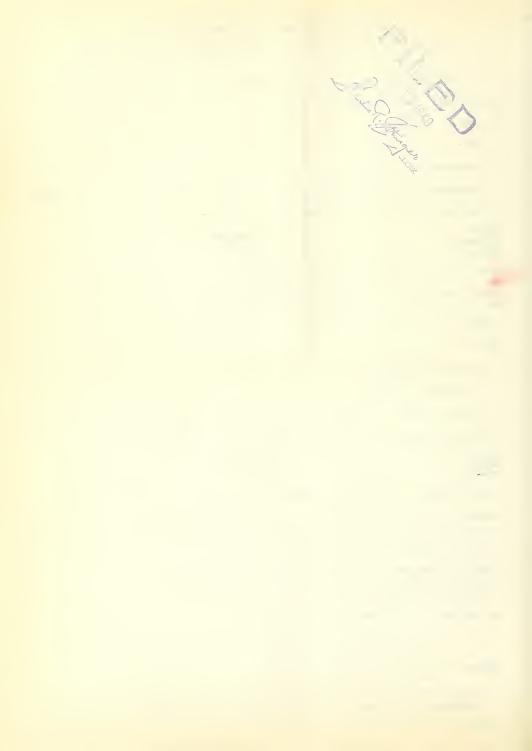


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony m and Groom's name . ne His age . " color. " occupation State " Birthplace Ci " Residence--Street No Single Widower 1st, 2nd or 3rdmarriage. Divorced Name of Father Maiden name of Mother Bride's name Her age .. " color " occupation... " Birthplace-State City " Residence-Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address c Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
William Gode and Frily Station
Groom's name Dilling Pardy 3
His age2 3
" color
" occupation of prafect
" Birthplace-City Worksington, State State
" Residence-Street No. 101 Led ing
Single Widower- Divorced } 1st, 2nd or 3rd- marriage }
Name of Father volting for Josh
Maiden name of Mother. Elicte nie floost
Bride's name <u>Field</u> Inter
Her age
" color
" occupation Billy
"Birthplace_CityCertingState
" Residence-Street No. 105 And Tealing City Indianally Ind
Single Widow Divorced Ist, 2nd or 3rd- marriage
Name of Father Charles Tomore
Maiden name of Mother
Date of this marriage. Other 12, 19 + 0.
Place of this marriage Indiana Undiana Name and title of person for the
His address Indiand win
· Jeliana
Name -Finera Stution (With Wess
Witness { Address

95



96 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony . **a**nd Groom's name ... His age . " color.. " occupation ... " Birthplace-City State " Residence—Street No. 30 ne City Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother. Bride's name ... Her age . " color.. " occupation. a " Birthplace-City. State " Residence—Street No. .. I. har for cere.City .. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father 10 Maiden name of Mother... Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address.... Name P Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Joseph <u>^</u> 0 and Groom's name ... His age .. " color.... e 46 occupation s " Birthplace State " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother... Stavar Bride's name Her age ** color.... gra occupation Mars " Birthplace-State " Residence-Street No. 2025 Ba City 🛁 Single Widow> 1st, 2nd or 3rdmarriage Diversed Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage.... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony le m. Williamso handler and c Groom's name pangler lter ? His age ... 66 color. ** occupation State " Birthplace Napo " Residence Street No216 City Single Widower 1st, 2nd marriage Divorced ò Name of Father. 40 Maiden name of Mother. le sto lia Bride's name 2 Her age . 66 color. " occupation " Birthplace State 10 5 " Residence -Street No.7 20 2340 (n City Sin**gle** Widow 1st, 2nd or 3rd marriage Divorced Name of Father. OR Maiden name of Mother Date of this marriage. Place of this marriage..., Name and title of person Performing this marriage. His address/.. Name Witness Address



Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
rederich Harvey Minger and Fuma Marquente Bowland
Groom's name Frederich Harry Minger
His age
" color while
" occupation Rechanical Engineer
"Birthplace-City_ Adamspolis_State_ hidrana
"Residence-Street No. R. 5 City diamapoli
Single Widower Divorced August (1st, 2nd or 3rd marriage August (1st, 2nd or 3rd)
Name of Father (all Munger
Maiden name of Mother frighting M. Bueley
Bride's name Snuma Marquerite Borolana
Her age
" color_ white
" occupation Ricq.
"Birthplace_City_hangfol_ State_ht
" Residence-Street No. 2093 S. Emann City Indrawapoli
Single Widow Divorced Augle { 1st, 2nd or 3rd marriage } furt
Name of Father David & Broland
Maiden name of Mother. Zelua & Jackson
Nolley 12 Cha
Date of this marriage
Place of this marriage and range of the person (New) Roppe aretime trank
His address
rid.
Name Albert Munper
Witness Address Address

37



5 1-12 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 12 ed m Biker milda and Stears name His age _____ 3 " color re "' occupation..... O " Birthplace--CitvState " Residence-Street No. HHH W HHHK .Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother. Bride's name michaed m Her age 24 " color...... occupation. " " Birthplace-City ree State " Residence-Street No. 444 Xuxut City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother 200 1 Ø ct. 1 n Date of this marriage. 1 -1940 Place of this marriage... Name and title of person Performing this marriage. Ley 5. n His address..... Name Witness 153 A Address Return this Report to County Clerk with License and Certificate

Wm B Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and ba Groom's name His age ... ** color. 66 occupation 66 Birthplace-State " Residence Street No. City Single Widower w 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color. 64 occupation " Birthplace-261 -City_ State \sim 9 " Residence—Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 940 Date of this marriage. Place of this marriage. Name and title of person (Performing this marriage His address. 2872 Name Ja Witness 0 Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Dinn or and noug Groom's name ... His age " color.... occupation..... Л State | Birthplace-1 66 n henwor " Residence-Street No. City Single Widower 1st, 2nd or 3rd WI marriage Divorced Rua N Name of Father 40 are Maiden name of Mother. use Bride's name 110 " color.... 66 occupation Lauso " Birthplace-State 600 -City. 541 " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother.... a 40 Date of this marriage. Place of this marriage Name and title of person Performing this marriage MARA His address.. m Name . Witness Address

Wm. B. Burford Printing Co., Indianapolis-7::

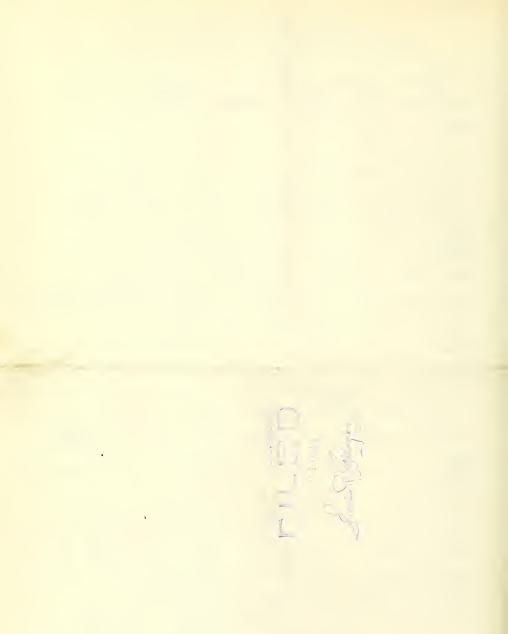


5

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age " color..... " occupation. " Birthplace-City 2 State " Residence—Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age ... " color____ n " occupation 3 " Birthplace-State " Residence--Street City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage ... Place of this marriage Name and title of person Performing this marriage. His address. Name Witness Address 50

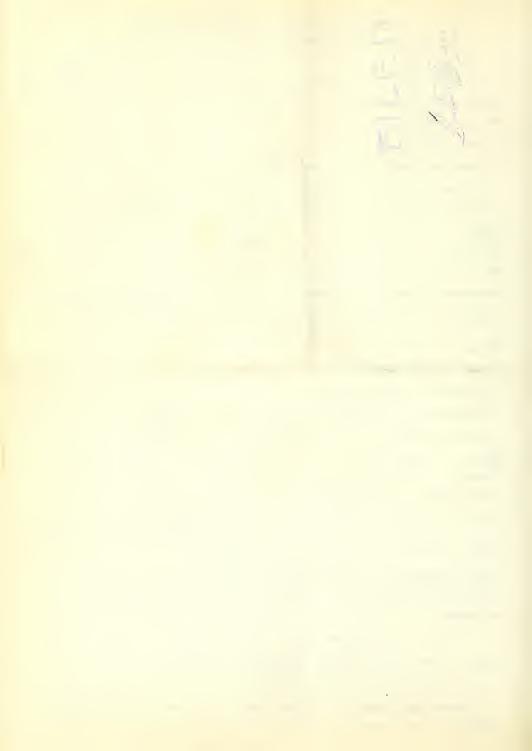


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

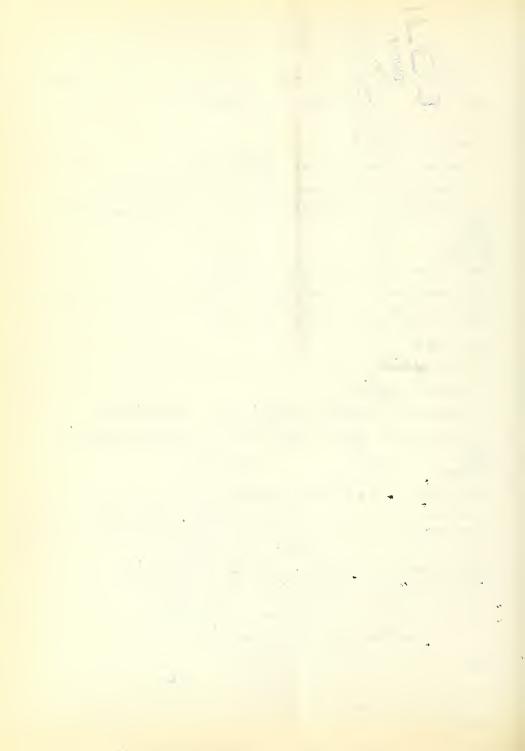
3-40 10 and Groom's name His age " color. 66 occupation " Birthplace State Naverna " Residence-Street No. ... $\mathbf{t}\mathbf{y}$ Single 🛩 Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age ** color.. " occupation. " Birthplace-City State " Residence—Street No. City Single -1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage ... Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony min Beneel 111 and Groom's name His age . " color... " occupation State " Birthplace-City " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age ... 66 color. 66 occupation " Birthplace-City. State N an " Residence-Street No. City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. 20 zon Name and title of person Performing this marriage His address. Name Witness Address



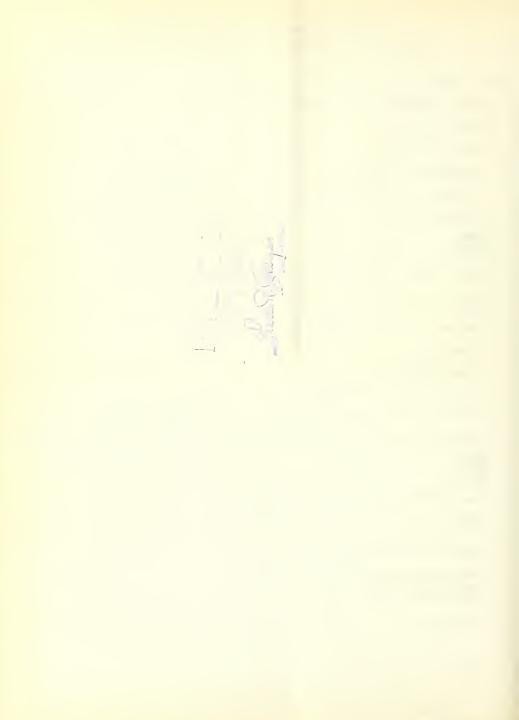
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Richard C Scott and estri Richard Groom's name ... 2.5 His age " color. Photograp occupation napolisState " Birthplace Union St. Street No. 2240 " Residence City Single 1st, 2nd or 3rd-Widower marriage Divorced. Name of Father Maiden name of Mother Bride's name Her age 龙 " color.... ** 66 State anal Birthplace " Residence-Street No. 2715 Nah dem City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. ß Maiden name of Mother 3 1940 Date of this marriage Place of this marriage.... Name and title of person Performing this marriage His address. Name Witness Address van



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Thelina anna in and Bill Groom's name His age ... 66 color.. " occupation seb 0 46 Birthplace-State " Residence—Street No. se Citv Single 🗠 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother Bride's name Her age 66 color... 66 occupation 46 Birthplace State C " Residence-Street No. City Single // Widow 1st, 2nd or 3rd marriage Divorced Name of Fat Maiden name of Mother 940 Date of this marriage. Place of this marriage Name and title of person Performing this marriage... His address Name Witness ddress

A DI CI

1 1; · Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony In Frederich Beam and HORN Groom's name Ira Frederich, Berns " color Mhite telle occupation 3 " Birthplace_City Mc Cool Indiana State 💧 " Residence-Street No. Mars Hill City 5 st, 2nd or 3rd marriage idower Dinne Divorced Name of Father. Bernalt know Maiden name of Mother Bride's name of tella May Greenwood Her age 4/ " color M Lite occupation House keeper " " Birthplace-City James win State Harrison St City "Residence—Street No. 7-23 -Single Widow ∫ 1st, 2nd or 3rd ∙marriage Vivo Divorced in Name of Father.... as Maiden name of Mother. Actober Date of this marriage atheran Church Place of this marriage mars Name and title of person Performing this marriage.... 339- Mes His address. ucliqua In Name Witness Elmer Chapm Address 🔜



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age " color. " occupation 44 BirthplacenA -City. Л State 5 " Residence—Street No. .Citv Single Widower 1st, 2nd or 3rd Л marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color... 66 occupation. " Birthplacea -City. State an " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 0111 th Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. a His address. Name 7 Witness Address 2 Return this Report to County Clerk with License and Certificate

Wm B Burford Printing Co., Indianapolis-778

•

To Be Returned by the Minister or Other Person Performing Ceremony
Lynn Jarvis and Mary Kate Burnett
Groom's name Jynn Jarvis
His age 2 Ś
" color White
" occupation Bank
"Birthplace_City_MaceStateIndeana
"Residence-Street No. 5/2 23/ St City Indearspolis Ind
Single Widower Divorced Single { 1st, 2nd or 3rd marriage }
Name of Father James Jawis
Maiden name of Mother Muniel Linn
Bride's name May Kate Burnett
Her age 21
" color White
" occupation Office
"Birthplace-City_ Indianapolis State Indiana
" Residence-Street No. 1106 10 32 St City Indranspoles
Single Single [1st, 2nd or 3rd] First
Divorced J Jugoer Burnett
Maiden name of Mother
Date of this marriage October 13, 1940
Place of this marriage Seventh Christian thurch Name and title of person Performing this marriage Rev. Howard & anderson
His address 5215 W15 Street
Indeanapolis Indeana
Name William Chaille
Witness Address 42W. 11 & St

Marriage Record for Roard of Health

Return this Report to County Clerk with License and Certificate

Wm. B Burford Printing Co., Indianapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age 66 color... ** occupation Birthplace-City podeo " " Residence-Street No. Z City Single Widowe**r** 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. An Bride's name Her age 66 color..... 44 occupation Inc " Birthplace-City___ 1 State 01 C. " Residence—Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 2 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Address Return this Report to County Clerk with License and Certificate

Win B. Burford Printing Co., Indianapolis-778



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Fall litte? and Groom's name His age 29 " color. ** occupation ** Birthplace State th " Residence No. City 🤇 Single 1st, 2nd or 3rd Widower marriage Divorced Name of Fath Maiden name of M Bride's name Her age " color " occupation 44 Birthplace State us " Residence Street No. Single Widow 1st, 2nd or marriage Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage... His address Name Witness ddress

5 0 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. " occupation Birthplace-" -Citv State " Residence Cit Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age 44 color " occupation " Birthplace-State " Residence--Street City Sin**gle** Widow st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person 1 Performing this marriage His address Name Witness Address Return this Report to County Clerk with License and Certificate

Return this Report to County Clerk with License and

Wm B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

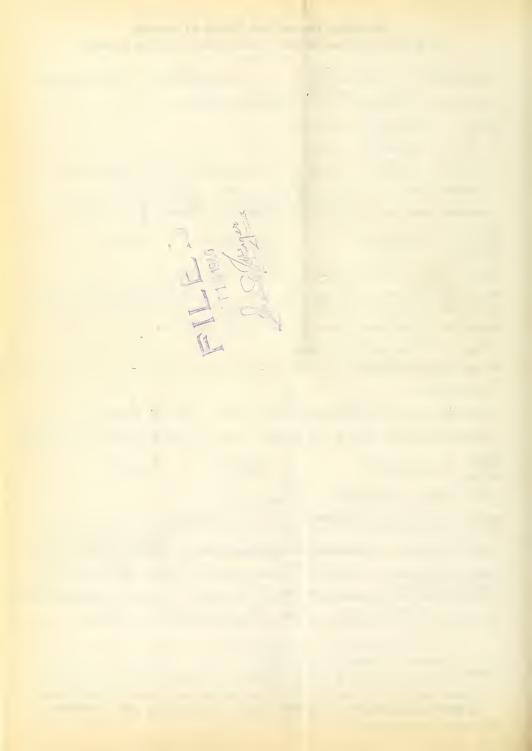
MIATA 7 Groom's name His age " color. " occupation " Birthplace-State 3 Th " Residence--Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father a Maiden name of Mother Bride's name Her age . " color... 44 occupation " Birthplace-State Ci76 ሯ " Residence—Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced x0 Æ Name of Father r Maiden name of Mother. Date of this marriage... Place of this marriage... Name and title of person Performing this marriage His address. 7 h Name Witness Address

Wm. B. Burford Printing Co., Indianapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony (Vn. Robert C. lender Sina and ____ a Pleix Groom's name His age " color..... me " occupation Issi wit Managea Www et in " Birthplace State S. /4a " Residence-Street No. .. 1301 Single Widower 1st, 2nd or 3rd Si marriage Divorced Name of Father.... Maiden name of Mother zna Bride's name Her age .. " color_____ " occupation. " Birthplace---City. State " Residence-Street No. 2231 Jonn Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother. 3 1940. Date of this marriage..... Place of this marriage 22 Name and title of person Performing this marriage, A His address. am Vame itness 11 ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name . His age . " color. 4 " occupation " Birthplace on State α " Residence—Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color. " occupation 0 un na State " Birthplace 10 na City 1. " Residence-Street No. Single Widow 1st. 2nd or 3rd marriage Divorced us Name of Father Maiden name of Mother Th Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address ria Name Witness Address



Marriage Record for Board of Health

To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name William Campbel
His age Twenty Two
" color Neg 20
" occupation Houseman
"Birthplace-City Indianapolis State Indiana
"Residence-Street No. 10.02. W. Kalmet City Indianapolis
Single Widower Divorced Ist, 2nd or 3rd
Name of Father Israc Campbell
Maiden name of Mother Mary Elizabethe Campbell
Bride's name Hajul Bernice Kale
Her age 2_
" color
)7
Sinala D
Single Ist, 2nd or 3rd Widow
Name of Father for the alter
Maiden name of Mother
Date of this marriage $10 - 14 - 40$
Place of this marriage 1002 W. Walnut Name and title of person Performing this marriage Samuel Scott
His address 931 W. Walnut St
Name (Cliver Barrutt
Witness Address 517 Plianatha St



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name . His age " color... " occupation " Birthplace-State -City " Residence--Street No. Single Widower 1st, 2nd or 3rd t r marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color. 0 0 occupation 44 " Birthplace-City State " Residence—Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage. 0 1 His address n Name Witness 20 S Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ada and Groom's name 1 His age . " color... " occupation " Birthplace tate " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color.. " occupation. State 4 " Birthplace-" Residence-Stree Citv Single Widow Divorced 1st. 2nd or 3rd marriage Name of Father... nu Maiden name of Mother Date of this marriage. Place of this marriage ... Name and title of person Performing this marriage His address Name Witness ddress



Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
Hilfa Oneta Bertsch and Dorman Russell Younce
Groom's name Norman Russell younce
His age 4 3
" color. W hite
" occupation Jost the maker
"Birthplace_CityCatonState
" Residence-Street No. 1441). Delatore City Delinegolis
Single Widower Divorced Widower 1st, 2nd or 3rd marriage 1st, 2nd or 3rd
Name of Father Mar Chillond Ellow orth younce
Maiden name of Mother Catherine Mae Clouse
Bride's name Hilfa Oneta Bertsch
Her age 25
" color_ w hite
" occupation non-
"Birthplace-City Cast Germontoun State Indiana
"Residence-Street No. R. a. 2 Bof City Crambing City
Single Widow Divorced } { 1st, 2nd or 3rd marriage } { 1st, 2nd or 3rd } { 1st, 2
Name of Father mouroe M. Bertsch
Maiden name of Mother Pearl Anna Rothermel
Date of this marriage October 14, 1940
Place of this marriage parsonage, Milton, Ind. Christian Clurch Name and title of person Performing this marriage William V. Parney
His address milton Indiang.
Witness { Name Mo C. H. Snyder Address Campridge City, Indiana
Return this Report to County Clerk with License and Certificate

.

1-1

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age " color. " occupation " Birthplace State Citv " Residence--Street City Single Widowe 1st, 2nd or 8rd marriag Divorced Name of Father Maiden name of Mother Bride's name Her age .. " color. ee " occupation " Birthplace-City State " Residence-Street No. City Single Widow 1st, 2nd or Srd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Imed 2 and Groom's name His age " color... " occupation. su " Birthplace—City State " Residence-Street No L Single Widower 0 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age ... " color.... " occupation " Birthplace—City 1 " Residence—Street No Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address..... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony an Groom's name His age " color. 44 occupation " Birthplace State " Residence -Street -2 City Single 1st. 2nd ਜਾ ਹੈਜ Widower marriage Divorced Name of Fathe Maiden name of Mother Bride's name Her age " color... " occupation " Birthplace State " Residence-Street No .City Single 1st, 2nd or 3n Widow marriage Divorced ~ Name of Father..... Maiden name of Mother Date of this marriage 00 Place of this marriage.. Name and title of person Performing this marriage His address Name Witness ddress

.

.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Carl FERN Robert ran and Groom's name Harry Leins 2 His age " color.... " occupation Carlina CityState ... Judian " Birthplaceranapolis " Residence-Street No. 4910 City tudiaunt rulup Single Widower 1st, 2nd or 3rd marriage Divorced 00 Chu 0 rau Name of Father... Maiden name of Mother... nn al 2111 Rola eur Bride's name Her age " color..... Une " occupation. " Birthplaceudravaples State 11 72 340 City 11 " Residence-Street No. RD 16.13 Single Widow 1st, 2nd or 3rd marriage Divorced Rola Name of Father..... Maiden name of Mother MyMu mith 1940 15th . Date of this marriage.... realorlis Place of this marriage.... Name and title of person Performing this marriage... hu use His address aprili Name . Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony m i and 0 Groom's name His age " color. " occupation " Birthplace-City " Residence-Street No. 11A Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. m Bride's name Her age " color..... " occupation " Birthplace-City State " Residence—Street No. City 6 Single Widow L 0 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother. Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address..... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony an and Groom's name His age . " color_ 66 occupation " Birthplace-City State " Residence--Street N City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color.. 64 occupation " Birthplace—City State l 5 , " Residence—Street No. CitvSingle Widow 1st. 2nd or 3rd marriage Divorced Name of Father. 2 7 44 Maiden name of Mother. 0 Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address. 1X a an anne Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groven Harola I_{Λ} Groom's name Karole His age 2.1 " color. " occupation. ani " Birthplace ana State S " Residence-Street No. 31 K. City na Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color... " occupation____ ender " Birthplace-City 00 State .. " Residence-Street No. 2.7.3 90 C City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father 11 Maiden name of Mother Date of this marriage Wet 15 1940 Place of this marriage. Name and title of person Performing this marriage. His address 23 Name Witness nde ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony un M and ullylu Unic k Groom's name upa 1.... His age ... " color... 66 occupation____ 1 -12 " Birthplace--City State 214 11 " Residence—Street No. 2 www.City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. 4 1teck 9 a Maiden name of Mother. 2 dona (Bride's name . and ulus Her age " color..... " occupation. " Birthplace-City, 2 Lik ana alio State -6 "Residence—Street No. 🖌 cla City 4 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father na Maiden name of Mother..... Date of this marriage Place of this marriage______ have eu Name and title of person Performing this marriage. His address. Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Robert Lee allen Groom's name Robert Lee allen His age 2 " color ЛS. 64 occupation " Birthplace_ 1039 Wright St. " Residence--Street Single sina 1st, 2nd o: marriage Widowe Divorced mon Name of Father. Maiden name of Mother ace Bride's name flore " color... W occupation 66 nchanapolis State " Birthplace_ City.... No. 150 rospect City anap " Residence-Single Widow 1st, 2nd or 3rd marriage sura Divorced ames Name of Father. Maiden name of Mother. Oct. 15, 1940 Date of this marriage Place of this marriage 3102 ancaste Name and title of person Performing this marriage. all. D w. Haro α . Lancaster St His address... Name Witness Return this Report to County Clerk with License and Certificate

Wm. B Burford Printing Co., Indianapolis-725

- 5 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age " color... 46 occupation_ State " Birthplace-City " Residence-Street No. Single 1st, 2nd or 31 Widower marriage Divorced Name of Father. Maiden name of Mother 11 Bride's name Her age " color. 44 occupation " Birthplace-Sta " Residence—Street No. 20ft Single Widow 1st. 2nd or 3 marriage Divorced Name of Father..... Maiden name of Mother. Date of this marriage Place of this marriage... Name and title of person Performing this marriage His address..... Name Witness Address Return this Report to County Clerk with Licen ertificat

Wm. B. Burford Printing Co., Indianapolis-778



*

-

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony intial illiano imas 2 11 and Groom's name His age _____ " color & " occupation " Birthplace-State 5 " Residence—Street No. C Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 1 Bride's name Her age " color... " occupation " Birthplace-" Residence-Street N Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriag Place of this marriage... Name and title of person Performing this marriage His address Name Witness Address

Wm. B. Burford Printing Co., Indianapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

4 6 0

Oliver J. Bourner and Louise Satterson
Groom's name Cline F. Bournan
His age
" color. While
" occupation_ Rezind
" Birthplace-City Vendricks & State Indiana
" Residence—Street No. 63.6 Domas City
Single Widower Divorced } <u>M. dainen</u> { 1st, 2nd or 3rd marriage } <u>J. nd</u>
Name of Father Jacob 13 orugan
Maiden name of Mother.
Bride's name Torring Patterson
Her age
" color. White
" occupation to mening
"Birthplace-City Clark Co. State
" Residence-Street No. 739 Donner City Inderance
Single_ Widow Divorced } <u>Widow</u> { 1st, 2nd or 3rd marriage } <u>J</u>
Name of Father Yes, Scheftens'
Maiden name of Mother.
Date of this marriage
Place of this marriage for the manual strange of the marriage of the manual strange of t
His address 1510 Easy 12 Street
Indianagolis, indiana
Name Emert Blume
Witness Address 2828 M 7 mm St

Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0. Ired net and Naul Groom's name His age " color. " occupation Birthplace " .Citv tate " Residence-ゴンン -Street No. 🎵 Single 1st, 2nd or 3rd Widowermarriage Divorced Name of Fathe Maiden name of Mother. Bride's name . 3 " color... " occupation "" Birthplace State " Residence Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Oc Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Wendell D Sottly and Clarice Johnson
Groom's name Wendell & Lith
His age 4.8
" colorWLT
" occupation M, D
"Birthplace_City_ the green State Indrance
"Residence_Street No. New augusta_CityR # 1
Single Widower Divorced Burnel (1st, 2nd or 3rd marriage) 2 nd -
Name of Father D
Maiden name of Mother.
Bride's name Clarice Johnson
Her age 37
" colorWK_t
" occupation tag. IVmse -
"Birthplace_CityDiluyState
"Residence-Street No. 4732-Kenwoodcity Judgles.
Single Widow Divorced Widow [1st, 2nd or 3rd marriage] 2nd -
Name of Father george Hulp Duckhart
Maiden name of MotherElla Nees
Date of this marriage.
Place of this marriage Merid office Michele Chili. Name and title of person Performing this marriage Michele Machele
His address 3, 7, y, Delfung S., Sudpl. Dry.
Witness { Name John N.S reist M.D. Address 57 E. Maple Road, Indianopolio Ind.
V /

2



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

267

and Groom's name His age " color. d 66 occupation " Birthplace--City 11 " Residence-Street Sing**le** Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age ... " color. man " occupation ud " Birthplace-City State " Residence-Street No. City Single / Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name . Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age ... De " color.. " occupation " Birthplace State " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age . " color. " occupation " Birthplace State " Residence-Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother 0 Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address. Name 11 d Witness Address

Wm. B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Treden C. N. and L Groom's name His age ... " color. 44 occupation " Birthplace Citv State " Residence--Street No. City Single Widower 1st, 2nd or 3rd nale marriage Divorced Name of Father 20 Maiden name of Mother Bride's name Her age " color. 66 occupation 4 G Birthplace-State City 400 " Residence-Street No. Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother... e Date of this marriage. Place of this marriage.. Name and title of person 11 Performing this marriage. His address 2 4 Name Witness Address

2. 19



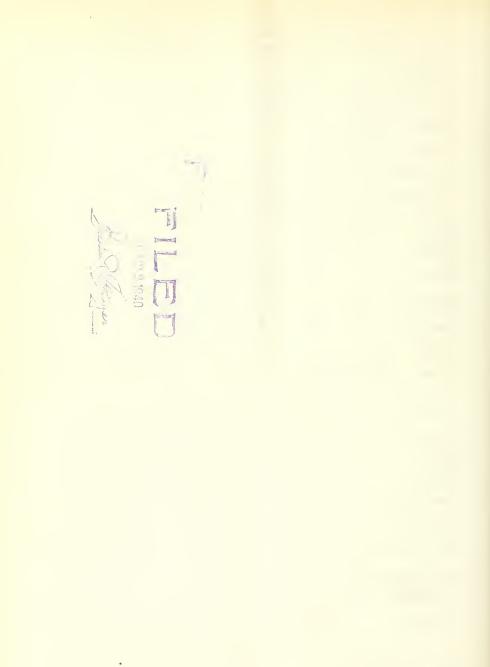
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony harles m Groom's name His age " color.... " occupation " Birthplace-State " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age . " color... occupation 44 $\mathcal{N}\mathcal{L}$ " Birthplace State " Residence--Street No. 2 Single Widow 1st, 2nd or 3rd marriage Divorced /(Name of Father. Maiden name of Mother. Date of this marriage... m Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address a Return this Report to County Clerk with License and Certificate

Wm B. Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age . " color. " occupation a Birthplace-State 66 -City " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color..... 66 occupation O State " Birthplace-City " Residence-Street No. Citz Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother.... Date of this marriage... Place of this marriage.... Name and title of person Performing this marriage. His address. Name Witness Address

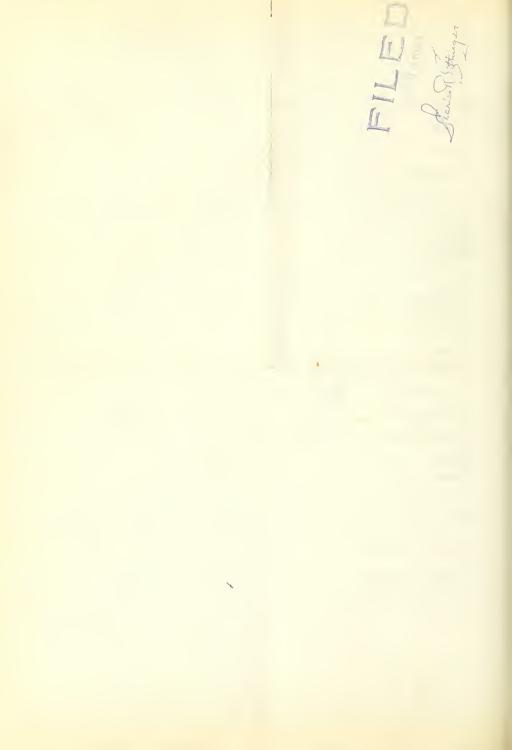
1.7



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Ø Groom's name ... His age ... " color. " occupation State " Birthplace—City " Residence-Street No Single Widower 1st, 2nd or 3rd D marriage Divorced Name of Father..... Maiden name of Mother Bride's name Her age 66 color.... 44 occupation State S " Birthplace---City " Residence—Street No Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage..... Name and title of person Performing this marriage. His address Name Witness Address

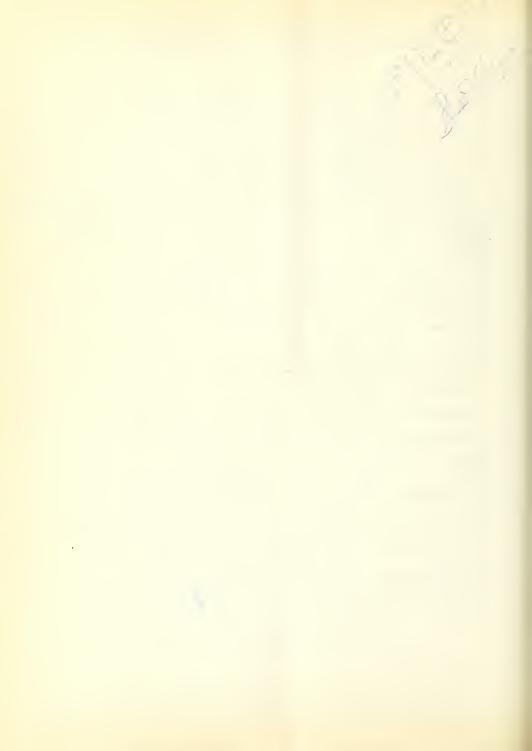


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony FEMEL and Malla ander. ds Groom's name His age two ** color. " occupation. " Birthplace-State " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age . " color. " occupation " Birthplace-City_ State City " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother. Date of this marriage..... Place of this marriage... Name and title of person Performing this marriage. His address. Name . Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color. 44 occupation " Birthplace " Residence -Street No. Single Widower no 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color. " occupation " Birthplace State " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father 9 Maiden name of Mother Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address Name Witness ddress



2 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age . 0 " color. ** occupation " Birthplace State S 3 11 " Residence-Street No. Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father rm Maiden name of Mother. Bride's name Her age " color.... " occupation " Birthplace-Ci State " Residence—Street No. n City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person MAR Performing this marriage. His address Name / Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony arank usil Time and Groom's name His age " color... " occupation. " Birthplace-City. State awake City " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced ad. Name of Father. a 1 Maiden name of Mother. s 11 Bride's name Her age 44 color.... 66 occupation. " Birthplace-Doleom State ... 1 and " Residence-Street No. de City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father..... Maiden name of Mother.... a a Date of this marriage. Place of this marriage..... Name and title of person Performing this marriage His address and Name . Witness ddress



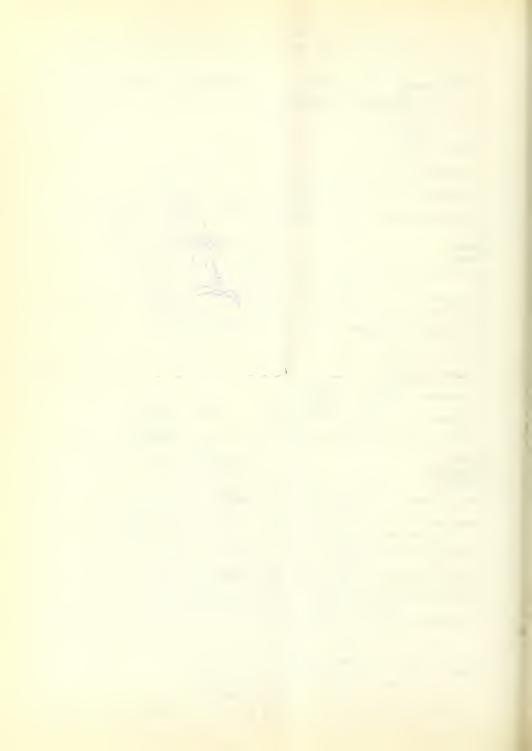
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color... 66 occupation 66 Birthplace State .Citv " Residence--Street No. itySingle-Widower 2nd or 3rd -1st marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color..... " occupation " Birthplace .State le mappe " Residence-Street No Lity Single 1st, 2nd or 3rd Widowmarriage Divorced Name of Father. Maiden name of Mother. 9 9 Date of this marriage... 4 C Place of this marriage 2A Name and title of person Performing this marriage His address Name Witness d Address Return this Report to County Clerk with License and Certificate

Wm. B. Barford Printing Co., Indianapolis-719



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Ser Cul vin Groom's name 1 His age 66 color. 66 occupation " Birthplace- Citv State 02 " Residence--Street No. Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Ela Bride's name Her age " color.... 1136 66 occupation " Birthplace-State 11.04 " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father 11 Maiden name of Mother Date of this marriage Place of this marriage... Name and title of person Performing this marriage His address. Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and reona Uncler son 29rd ans Groom's name S Z His age ... " color 66 occupation " Birthplace State " Residence--Street No. City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father au Maiden name of Mother and 10 100 Bride's name Her age 46 color. ouse occupation. 44 " Birthplace 10 State in aur Ś " Residenceal Street No. cm City Single Widow 1st, 2nd or 3rd marriage Divorced 14 2002 Name of Father Maiden name of Mother mal Date of this marriage Place of this marriage. Name and title of person Performing this marriage. un His address Name Witness Address



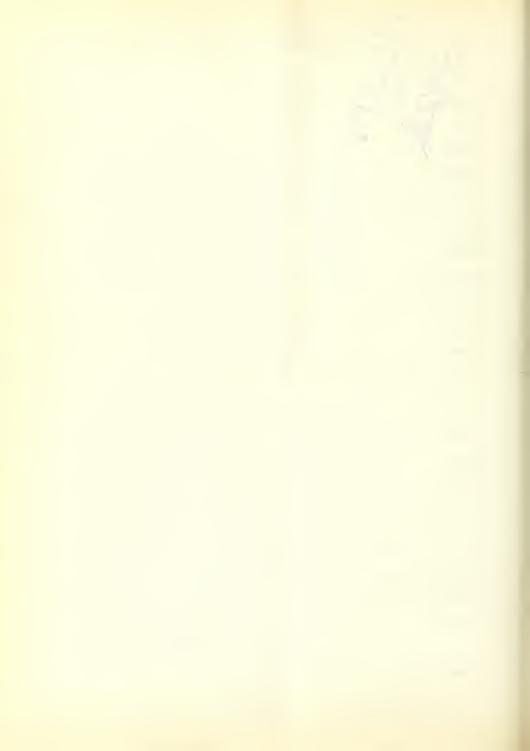
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 9 MN and Groom's name His age " color. " occupation " Birthplace 011 State " Residence Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age ... 66 color.... " occupation " Birthplace-City Spate " Residence-Street No Git Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother... Date of this marriage... Place of this marriage_ Name and title of person Performing this marriage. His address. Name . Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

23

Pol It it
Groom's name <u>auf Marrel</u>
His age <u>35</u>
" color_ White
" occupation Real Estal
" Birthplace-City East Orange State hew Jecely
" Residence-Street No. 300 ho Murchan It City Indrawookalis And.
Single Widower Divorced J Lovorced [1st, 2nd or 3rd marriage]
Name of Father Kalph Starrell
Maiden name of Mother. Kny Ward
1× 1 PI
Bride's name Viola Livain Recker
Her age <u>39</u>
" color
" occupation laberwoman
"Birthplace_CityLudianafalisStateLud
" Residence-Street No. 129 219 Ch A City Inchanafalis
Single Widow Divorced Undowned [1st, 2nd or 3rd marriage] 2nd
Name of Father Stremout Swami
Maiden name of MotherButten Gillatin
Date of this marriage.
Place of this marriage
His address.
Indianappli
Name Volume Grown,
Witness { Address 25 Birkely Ran



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

His age <u>34</u> " color <u>White</u> " occupation <u>Driven</u> Hays Freight dines " Birthplace-City <u>Invincton</u> State <u>Ky</u> . " Residence-Street No. 3030 Eart 10 th City <u>Indianopolis</u>	Evenett Le Grand and Madge Edena
" color	Groom's name Event he grand
" occupation briven Hays Freyht Lines " Birthplace-City Iwington State Ky. " Residence-Street No. 3 0.30 2 2 10 the City Indusing this Single Widower Devoid [Ist, 2nd or 3rd] 2 ^{M4} Divorced John Le Grand Maiden name of Mother Marjonic Johnson Bride's name Madge Edens Her age 28 " color White " occupation Laundress " color White " occupation Laundress " birthplace-City Dabrey State Ind. " Residence-Street No. 1405 College City Indusangolis, Ind. Single Widow J Single [Ist, 2nd or 3rd] 1 ²¹ Widow J Single [Ist, 2nd or 3rd] 1 ²¹ Maiden name of Mother. Flora Cikus Maiden same of Mother. Flora Cikus Name and title of person Performing this marriage F. gKuetler - Minister Name Mainers S23 M. Berille Cur Mainers Name Maangolia, Ind.	
"Birthplace-City_friend State Ky. "Residence-Street No. 3000 and 10% City Indianapolis Single Divorced Divorced State No. 3000 and 10% City Indianapolis Name of Father_ Maiden name of Mother Maryine Johnson Bride's name Madge Edens Her age 28 " color_ " color_ " color_ " birthplace-City_Dabney State Ind. " cocupation_ " Birthplace-City_Dabney State Ind. " Residence-Street No. 140.5 Colly City Indianapolis, Ind. Single { 1st, 2nd or 3rd } 12 Widow Divorced } Name of Father_ Maiden name of Mother Flora Culture Maiden name of Mother Flora Culture Date of this marriage_ Name and title of person Performing this marriage_ Name International State State Ind. Witness Name International State Ind. Witness Name International State Ind. Witness Name International State Ind. "Name International States Ind. "State Ind. "St	" color White
"Residence-Street No. 3020 Last 10th City Indiangolis Single Widower Divorced Divorced for the Grand Maiden name of Mother Marynie Johnson Bride's name Madge Edens Her age 28 " color White " color White " cocupation Laundress " is include a state Ind. " Birthplace-City Dabney State Ind. " Residence-Street No. 1405 Collige City Indianapolis Ind. Single [1st, 2nd or 3rd] 14 Widow Divorced Jungle [1st, 2nd or 3rd] 14 Maiden name of Mother Tlona Cukens Maiden name of Mother Tlona Cukens Date of this marriage Indianapolis Name and title of person Performing this marriage T. Glueber - Munister His address Jungle [Science - Munister Maidense - Street No. 140, 1940 Place of this marriage Indianapolis Name and title of person Performing this marriage T. Glueber - Munister His address Jungle [Science - Munister Maidense - Jungle	" occupation Driven Hayes Freight Lines
Single Widower Divorced J. Duroned { 1st, 2nd or 3rd marriage } 2.4 Maiden name of Mother. Marjinie Johnson Bride's name Bride's name Her age 28 " color White " color Raundress " color Raundress " cocupation Raundress " occupation Raundress " birthplace-City Dabney State Ind. " accupation Raundress " Birthplace-City Dabney State Ind. " Residence-Street No. 140.5 Collys City Indianapolis, Ind. Single Single [1st, 2nd or 3rd marriage] Widow Divorced J. Single [1st, 2nd or 3rd marriage] Name of Father William Edena Maiden name of Mother. Flora Cikens Date of this marriage Indianapolis Name and title of person Performing this marriage F. Glueble - Minister His address. 523 N. Benille ar Maianapolis, Ind. Witness Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witnes (Name Flaances (inreef 140.5 N. Cofficient and States) (inreef 140.5 N. Cofficient and States) (inreef 140.5 N. Cofficient and States) (inreef 140.5 N. Cofficient and States	
Single Widower Divorced J. Duroned { 1st, 2nd or 3rd marriage } 2.4 Maiden name of Mother. Marjinie Johnson Bride's name Bride's name Her age 28 " color White " color Raundress " color Raundress " cocupation Raundress " occupation Raundress " birthplace-City Dabney State Ind. " accupation Raundress " Birthplace-City Dabney State Ind. " Residence-Street No. 140.5 Collys City Indianapolis, Ind. Single Single [1st, 2nd or 3rd marriage] Widow Divorced J. Single [1st, 2nd or 3rd marriage] Name of Father William Edena Maiden name of Mother. Flora Cikens Date of this marriage Indianapolis Name and title of person Performing this marriage F. Glueble - Minister His address. 523 N. Benille ar Maianapolis, Ind. Witness Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witness (Name Flaances (inreef 140.5 N. Cofficient and States) Witnes (Name Flaances (inreef 140.5 N. Cofficient and States) (inreef 140.5 N. Cofficient and States) (inreef 140.5 N. Cofficient and States) (inreef 140.5 N. Cofficient and States	"Residence-Street No. 3030 Cart 10" City Indianapolis
Maiden name of Mother Harjine Johnson Bride's name	Single Survived { 1st, 2nd or 3rd } 2nd
Bride's name Madge Edens Her age 28 " color white " occupation Raundress " Birthplace-City Dabney State Ind. " Residence-Street No. 1405 Colly City Indianapolis, Ind. Single Widow J. Single [1st, 2nd or 3rd marriage] 1.4 Widow J. Single [1st, 2nd or 3rd marriage] 1.4 Name of Father William Edena Maiden name of Mother Flora Cickens Date of this marriage Indianapolis Name and title of person Performing this marriage. F. Grubber - Minister His address 523 N. Benille an Maidense Managolia, Ind. Witness Name Firances William Witness	Name of Father John he grand
Her age 28 " color White " occupation Faundress " Birthplace-City. Dabney State Ind. " Residence-Street No. 1405 Colly City Indianapolis, Ind. Single Single [1st, 2nd or 3rd marriage] Widow Joivorced Julian Edena Name of Father William Edena Maiden name of Mother. Flora Cuikens Date of this marriage Indianapolia Name and title of person Performing this marriage F. Grubber - Minister His address. 523 N. Berille ar Maiden States Julianapolia, Ind.	Maiden name of Mother Johnson
" color	Bride's name Madge Edens
" color	Her age 2.8
"Birthplace-City	
"Residence-Street No. 140.5 College City Indianapolis, Ind. Single Widow Divorced Juigle {1st, 2nd or 3rd marriage } 124 Name of Father William Edena Maiden name of Mother Flora Cickens Date of this marriage October 18, 1940 Place of this marriage Indianapolia Name and title of person Performing this marriage F. Hueble - Minister His address 523 N. Berille ar Maranapolia, Ind. Witness Name Firances (Firey 140.5 N College are	" occupation Raundress
Single Widow Divorced J. Single {1st, 2nd or 3rd marriage } 124 Name of Father. William Edena Maiden name of Mother. Flora Cuikens Date of this marriage October 18, 1940 Place of this marriage Indusniquelia Name and title of person Performing this marriage F. Glueble - Minister His address. 523 N. Berille ar Maranapolia, Ind. Witness Name Firances (irrey 140.5 N Colfege ard	"Birthplace-City Dabney State Ind.
Widow Divorced Stand Sta	" Residence-Street No. 1405 College City Indianapolis, Ind.
Name of Father William Edena Maiden name of Mother Flora Cuikens Date of this marriage October 18, 1940 Place of this marriage Indusnapolia Name and title of person Performing this marriage F. Gluebler - Minister His address 523 N. Berille ar Maranapolia, Ind. Witness Name Firances (iirey 140.5 N Colfege are	Widow Ingle Ist, 2nd of Srd
Date of this marriage October 18, 1940 Place of this marriage Indusnapolia Name and title of person Performing this marriage F. Gruebler - Minister His address. 523 N. Berille ar Indusnapolia, Ind. Witness Name Firances (irref 140.5 N Colfege are	V I. TOO . CI
Place of this marriage Indianapolia Name and title of person Performing this marriage F. Kuebler - Minister His address. 523 N. Berille ar Indianapolia, Ind. Witness Name Firances (iirey 140.5 N. Colfege are	Maiden name of Mother Flora_ Cuikens
Name and title of person Performing this marriage F. Kuebler - Minister His address. 523 N. Berille ar Maranapolia, Ind. Witness Name Firances (irrep 140.5 N. Colfege and	Date of this marriage October 18, 1940
Performing this marriage f. Huebler - Muncher His address. 523 N. Beville ar Indranapolia, Ind. Witness Name Firances (irrep 140.5 N. Colfege and	
Witness Name Firances (iircep 140 5 N Colfege ave	Performing this marriage F. Kuebler - Munsley
Witness	His address. 523 N. Berille ar
Witness	Indianapolis, Ind.
Address Aleman Latch 2240 Washington	Name Fitrances (aircep 140 5 N Colfege and
	Address Alermon Fatch 2240 W Washington



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony rentes and Groom's name His age " color. " occupation " Birthplacein State Citv " Residence--Street No. a City in Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 0 Bride's name Her age . " color... " occupation " Birthplace---City z.State 0 8 " Residence-Street No Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mot Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



53 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony our a 2ari and Groom's name His age . " color. " occupation_ " Birthplace-City. State " Residence-Street No. Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color..... " occupation " Birthplace-City State " Residence—Street No./624 Mar City Single Widow 15 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name _ Witness Address



22 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Million mar Groom's name " color..... " occupation " Birthplace-City. .State " Residence—Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother MAG Bride's name Her age _____ " color_____ 1 ** occupation. " Birthplace---CityState S " Residence-Street No. City Single Widow 1st, 2nd or 3r marriage Divorced Name of Father... Maiden name of Mother_ Date of this marriage. Place of this marriage..... Name and title of person Performing this marriage. His address Name Witness Address Return this Report to County Clerk with License and Certi te



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony dam and Groom's name z1 20 His age . 66 color.. 44 occupation -Pac " Birthplace------State L " Residence—Street No. $\ll \delta$City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. a Maiden name of Mother. alli Bride's name gan Her age 44 color... 66 0 occupation " Birthplace State .Cit.v Re "Residence-Street No. 1933 C ese City Single Widow s 1st, 2nd or 3rd osi marriage Divorced Name of Father... all ances 1 a Maiden name of Mother 0 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1 U. er and (Groom's name His age " color..... 44 occupation 20 " Birthplace-City State " Residence—Street No. 4.2 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color..... W/m/h 44 occupation a n " Birthplace-State -City " Residence-Street/No.//3 2 Wity Single Widow 1st. 2nd or 3rd marriage / Divorced Name of Father. Maiden name of Mother. Date of this marriage Place of this marriage 1 Name and title of person Performing this marriage. 11 His address. 10 Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Harold & Boyd and Ruth & Nordsielc
Groom's name Harold D. Boyd
His age 2.5
" color White
" occupation Sheet Metal Worker
"Birthplace-City Indianapolio State Jyd
" Residence-Street No. 2618 E. Michigan City Indianapolis
Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Name of Father Harald , Doyd (deceased)
Maiden name of Mother Louise Aulman
Bride's name Ruth E. Mardsiefen
Her age 2.0
" colorWhite
" occupation Engraver
"Birthplace_City_udeinepales State_bud
" Residence-Street No. 2122 Napoleon City hipianepoles
Single Widow Divorced } { 1st, 2nd or 3rd marriage } Just
Name of Father Henry nordoich
Maiden name of Mother
Date of this marriage
Place of this marriage Sudiace abalis Sud Name and title of person Performing this marriage 9.5. albert, minister
His address 414 n. Wallace Ato
fudianapolis Lieb
Name Here nordviela
Witness Address Indianapolis, Ind



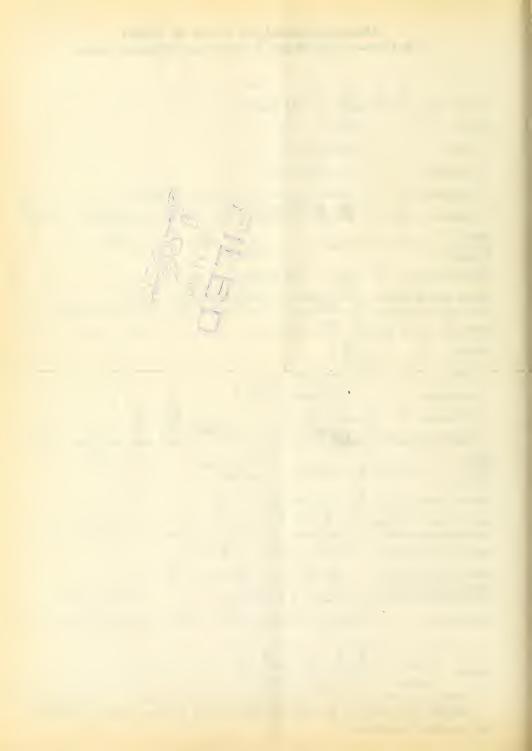
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony No Groom's name His age " color. " occupation " Birthplace-State " Residence-Street No. 1....CityQ Single 1st, 2nd or 8rd-Widower marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color... 4 66 occupation " Birthplace-State -Citv" Residence—Street No. 9 City Single Widew 1st. and or ard marriage Divorced Name of Father. Maiden name of Mother. (Date of this marriage. Place of this marriage... 0 Name and title of person Performing this marriage. His address Name a Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name Chinton Nelson
His age 42
" colorBrown
" occupation Machinac
" Birthplace-City_ Jiones Co_ State Jenn.
" Residence-Street No. 627 focke # 3 Zily Indianapolis, Ind.
Single Widower Divorced { 1st, 2nd or 3rd marriage } 2nd
Name of Father <u>moses</u> <u>Relson</u>
Maiden name of Mother Lyzie Howard
Bride's name Susie nelson
Her age 3 9
" colorBrown
" occupation Housewife
"Birthplace-City_bulskiStateJenn.
"Residence-Street No. 629 Locke St # 320 Indianapolia Ind
Single Widow Divorced { 1st, 2nd or 3rd marriage } 2nd
Name of Father J. Sridgforth
Maiden name of Mother Mattie Parks
Date of this marriage D.Ct. 18th 1940.
Place of this marriage Indiana polis. ful.
Performing this marriage J. G. Martin minister.
His address 936 W. north St. Indianapolis Ind
Elith Theoret:
Witness { Name O all Murlin Address 936 Winorth St., Indianopolio, Ind
Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony n. h. and DU Groom's name ... Л His age " color. " occupation " Birthplace ...State .. " Residence—Street No. 905 И,City .. Single-Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name 11-Her age " color... " occupation ... " Birthplace-State " Residence-Street No. hildowne 10 ...City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. l Date of this marriage. 1 Place of this marriage..... Name and title of person Performing this marriage. His address Name Witness ddress

-

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

: 7

and
Groom's name David Law Curran
His age 2 2
" color <i>W</i>
" occupation Companiant
" Birthplace-City III Elphant State Indiana
" Residence-Street No. 126 S. Vine City Clabor, Such
Single Ist, 2nd or 3rd Widower marriage
Name of Father. Louis anchew Curran.
Maiden name of Mother The Eunice May Bauman
Bride's name Thelma Dreve Fairington
Her age _ 2 0
" color
" occupation
"Birthplace-City Indianeyrolis State
" Residence-Street No. 19 30 W. Maries City Indiano st.
Single Ist, 2nd or 3rd Widow marriage
Name of Father. Clarence L. Janington
Maiden name of Mother
Date of this marriage Car 19, 1940
Place of this marriage Judianeguly Sick Name and title of person Performing this marriage Jester N. Ford Minute
His address Indianoyslin, Ind.
Witness { Name Mus C. L. Farme line Address 1930 W. Martis St.

FILEO 2 6 1910 PIEO 2 6 1910 Alane R. Hangaeter

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

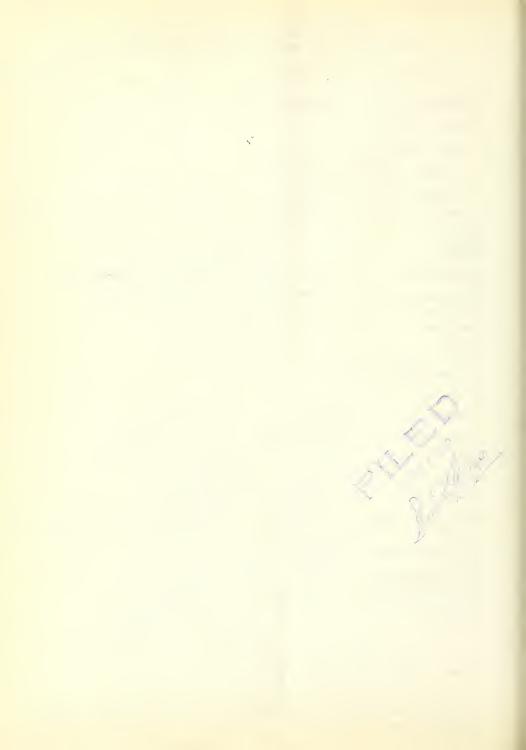
... and lenn Harold Groom's name His age " color " occupation " Birthplace ana 10 State 750 IsterCity ... " Residence Single Widower 1st, 2nd or 3rd marriage Divorced IN en Name of Father Maiden name of Mother ma Bride's name Her age " color.... " occupation " Birthplace State ar unl City Single Widow 1st, 2nd or 3rd marriage Divorced NO Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage... Name and title of person Performing this marriage... His address Name Witness Address

Marriage Record for Board of Health

ohn L moncar ca l and as Groom's name His age ... " color... 66 occupation a " Birthplace nim C State " Residence-Street No. City (s Single Widower 1st, 2nd or 3rd marriage Divorced_ Name of Father. mari Maiden name of Mother. Bride's name 7 one no Her age Ce. " color... " occupation " Birthplace .State b " Residence—Street No. a anta City Single Widow 1st. 2nd or 3rd 1 m marriage Divorced hs R Name of Father..... 2 Maiden name of Mother. 12 d 9 9 Date of this marriage.... Place of this marriage..... Name and title of person Performing this marriage in His address. ran 15 c d Name Witness 12 0 ddress an



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony DONOV amism m'ake and Mº Cate ames m Groom's name ... 42 His age hit. " color u " occupation " Birthplace State 7 terry V " Residence--Stree Citv No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age 44 color. 66 occupation Terre huag " Birthplace State " Residence----Street No. City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. ne October 19 1940 Date of this marriage..... 8 ta Place of this marriage.... Name and title of person Performing this marriage. in His address 80 ame Witness



Groom's name 2 3 His age ... "" color. " occupation " Birthplace-State -City " Residence-Street No City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother. Bride's name Her age 66 color ... 66 occupation " Birthplace-11 State 6 " Residence—Street No. City Single Widow 2 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 0 10 Date of this marriage. Place of this marriage_ Name and title of person l Performing this marriage His address. Name Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and usse Groom's name His age 20 " color..... occupation 44 " Birthplace " Residence-Street No. City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Moth Bride's name Her age . " color " occupation. " Birthplace in State na ano " Residence-Street No. 140 lan 1 Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother a Date of this marriage. 94 Place of this marriage. Name and title of person Performing this marriage. His address 6 Hat Name Witness 1 th Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Marshall Eugene Stone and Margaret Way Groom's name Marshall Engene Stone His age 27 " color. W. Machinist. " occupation Scotland State " Birthplace-City " Residence-Street No 521 & ast 11th Single Widower Divorced ____ { lst, 2nd or 3rd marriage yde Stone Name of Father 6 Buler Mae Maiden name of Mother. Bride's name Margaret. Day Her age 27 " color_ While " occupation Seautician. Sedford " Birthplace-State 525 East 11th icapolis " Residence-Single Widow Divorced 1st, 2nd or 3rd marriage First-Name of Father Clande E. A a bler le. Ma Maiden name of Mother Ictober Date of this marriage Indianapolis Ind. Place of this marriage Christ 6. Name and title of person Charles S. Hecring bottom Ľ. apl. His address 24 mapoh Name William r. Steel Ebre ha Vona solio Jud Indiana Witness Indianapolis, Ind.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. 66 occupation " Birthplace State " Residence—Street No. Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color. " occupation " Birthplace State 3 " Residence-Street No. Single Widow> 1st, 2nd or 3rd marriag Divorced Name of Father Maiden name of Mother D Date of this marriage. Place of this marriage..... Name and title of person Performing this marriage His address Name Witness Address



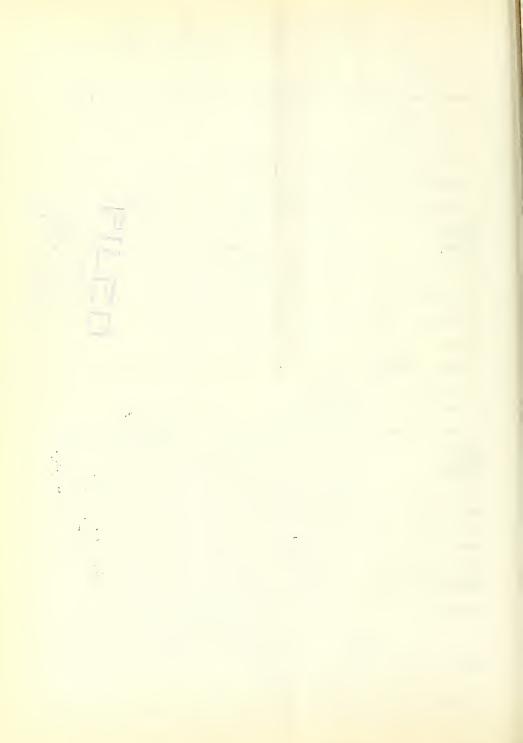


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name 102 20 His age Lishi " color " occupation Wa " Birthplace-City. ...State Street No. 504 " Residence-City Single Widower 1st, 2nd or 3rd marriage Divorced 1 ma Name of Father. Maiden name of Mother. harle Bride's name . Her age l. " occupation ...) / / / / " Birthplace-State City. " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage ... Name and title of person Performing this marriage. His address Name ... Witness ddress Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony that Tay and Yhan ΚM Groom's name 3 His age . White " color... " occupation " Birthplace State З 2 " Residence-Street No. Single Widowes 1st. 2nd or 3rd Divorced Name of Father Maiden name of Mother 2 Bride's name Her age . " color " occupation " Birthplace State m " Residence-Street No. ... 2010h. Single Widow 1st, 2nd or 3rd marriag Divorced Name of Father Maiden name of Mother 4 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

~ . .

and
Groom's name Haref Strayy
His age 3 (
" color
" occupation father
" Birthplace-City, Judonpoli State Find
" Residence-Street No. 223191 Bosont City Judonfali
Single Widower discourses Single Widower Single Sin
Name of Father Malles Strongly
Maiden name of Mother Jennie De Moon
Bride's name Betty Hardry
Her age 2 3
" colorMlite
" occupation non
" Birthplace_City Merry Castlo State Find.
" Residence-Street No. 30/8/fracuord City Judanfal's
Single Widow- Divorced- } fright free free free free free free free fre
Name of Father (DSaa) Hondon
Maiden name of Mother Bissif Mrt Sutiry
Date of this marriage Oxf 191940
Place of this marriage Andread title of person Performing this marriage RM Lodilf ministry
His address 222 Park and City
Witness { Name Analy Attrough Address 2231 21 Basarford city

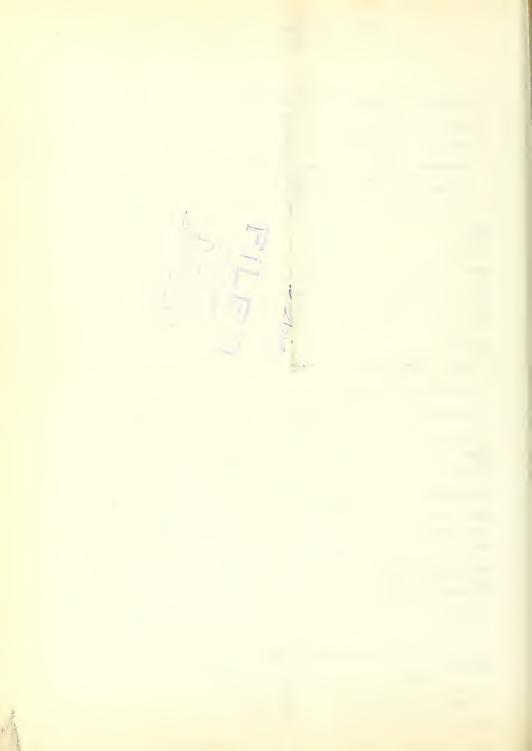


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Kellow ernal and alice mal Dorau Ver sche Kellen Groom's name His age _____ " color.... Machinis " occupation Albrach " Birthplace-City_ orh State idiana " Residence-Street No. 1667 W. ide Kinera Single Widower 1st, 2nd or 3rd marriage Divorced Killer lorna Name of Father Mary chatader Maiden name of Mother. alia Bride's name ... 18 Her age 1. " color.... Wai " occupation 01 Indiana " Birthplace-City ana State " Residence-Street No. 3/8 n. Belle View Place City _ Single Widow 1st, 2nd or 3rd marriage Divorced 15 CM. llora Name of Father..... Maiden name of Mother. Ectober 19 1940 Date of this marriage..... rdia. Place of this marriage.... Name and title of person ace Performing this marriage..... 3 His address.... Name Witness W. 20 0 5 Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

... and ent . INI Alera Groom's name His age " color. " occupation " Birthplace State . W. HOth 9 ana " Residence-.City ... Street Single Widower 1st, 2nd or 3rd marriage Divorced aver Name of Father. Maiden name of Mother. Bride's name Her age 29 " color cretary " occupation " Birthplace ansi State City " Residence-Street No. 101 W. 40 th City Single Widow 1st, 2nd or 3rd marriage Divorced hor. L Name of Father. 21 Maiden name of Mother actor Date of this marriage.... 19 1440 Place of this marriage... Name and title of person Performing this marriage. phe His address. miles Name Witness

Wm. B. Burford Printing Co., Indianapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and inches (P. C Groom's name ... 36 His age 4 " color... " occupation h " Birthplace " Residence-N Street. City Single Widower 1st, 2nd or 3rd L marriage Divorced ぞ Name of Father Maiden name of Mother. ٢, Bride's name Her age " color "" occupatio " Birthplace State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother actor Date of this marriage..... 440 Place of this marriage. Inel Name and title of person б 20 Performing this marriage. His address di Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color... occupation " Birthplace-City State " Residence-Street No. City Single Widower-1st. 2nd or 3rdmarriage Divorced 0 Name of Father. Maiden name of Mother Bride's name 2 5 Her age 1 " color..... " occupation. State " Birthplace-City. " Residence-Street No. City Single Widow-1st, 2nd or 3rdmarriage Divorced Name of Father... Maiden name of Mother Date of this marriage. Place of this marriage.. Name and title of person Performing this marriage His address. Name Witness ddrees

H 10072:11 L

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color..... w ** occupation " Birthplace-State " Residence-Street N •City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color.... " occupation " Birthplace-State Citv " Residence--Street No. 2 Single Widow 1st, 2nd or 3rd marriage Divorced 1 Name of Father. l Maiden name of Mother. Date of this marriage... Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Ø os O Groom's name His age 44 color... 66 occupation " Birthplace-City... Sta P " Residence—Street No. Single 1st, 2nd or 3rd 0 20 Widower marriage Divorced Name of Fathe Maiden name of Mother Bride's name đ Her age .. 44 color.... " occupation " Birthplace State Citv " Residence—Street No City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address Return this Report to County Clerk with License and Certificate

Wm B. Burford Printing Co., Indianapolis-775

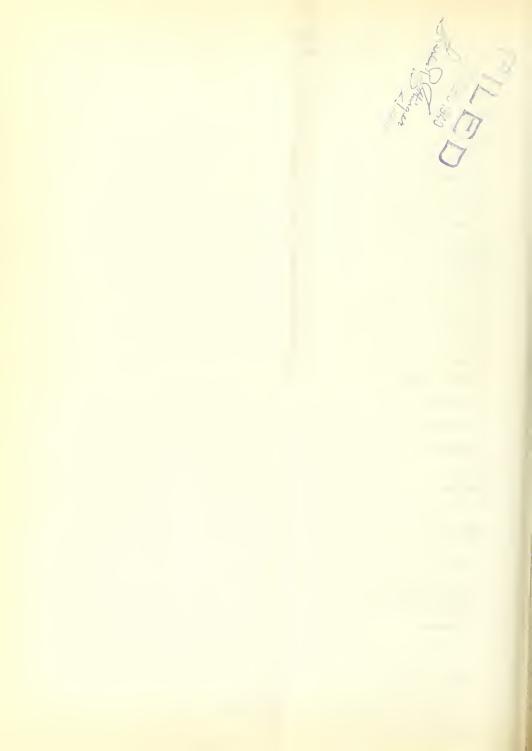


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Raymond D. Hrulesdale and Hilda Thomas Groom's name Raymond & Van asdale His age _____ 39 " color_ H/hite occupation Teache 66 City MeenwoodState udiana 66 Birthplace-"Residence-Street No. 392 W. MarnCity nor Single Widower 1st, 2nd or 3rd 1 marriage Divorced Name of Father_Bert a and Bisda 10 Maiden name of Mother Ma Bride's name Hilda Thomas 30 Her age Alle color..... 0 erelari occupation. " Birthplace-City Juntington Courty State india Tun City Lidea " Residence-Street No. Shelfuld Single 1st, 2nd or 3rd Widow marriage Divorced in onas Name of Father.... i Maiden name of Mother. Betth als 1940 arto Date of this marriage nh Place of this marriage_____ Name and title of person Performing this marriage... 1 man mun Li d. His address.... Witness anest Steenword ddress Return this Report to County Clerk with License and Certificate

Wm B Burford Printing Co., Indianapolis-791



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony nomas a .. en 🔜 and an Groom's name His age 66 color..... " occupation ... " Birthplace—City... State ast City " Residence-Street No. . Single 1st, 2nd or 3rd N au Widower marriage Divorced Ma m Name of Father... 1 Maiden name of Mother 10 Bride's name ... Her age ... " color..... occupation " Birthplace-City... State " Residence—Street No. City .. æ Single Widow 1st, 2nd or 3rd marriage Divorced l 1 Name of Father. Maiden name of Mother... Date of this marriage. in Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 Groom's name His age " color.... 44 occupation " Birthplace State " Residence-Street No. City Single Widower 1st, 2nd or 3rd M marriage Divorced Name of Father. Maiden name of Mother n Bride's name Her age color while 66 " occupation ... 66 Birthplace-City State " Residence-Street No. City Single Widow 1st, 2nd or 3rd N. marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address

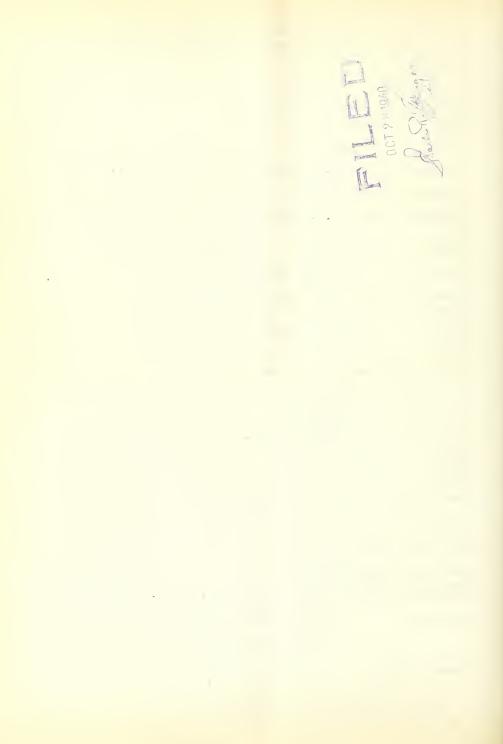


Marriage Record for Board of Health

: 10

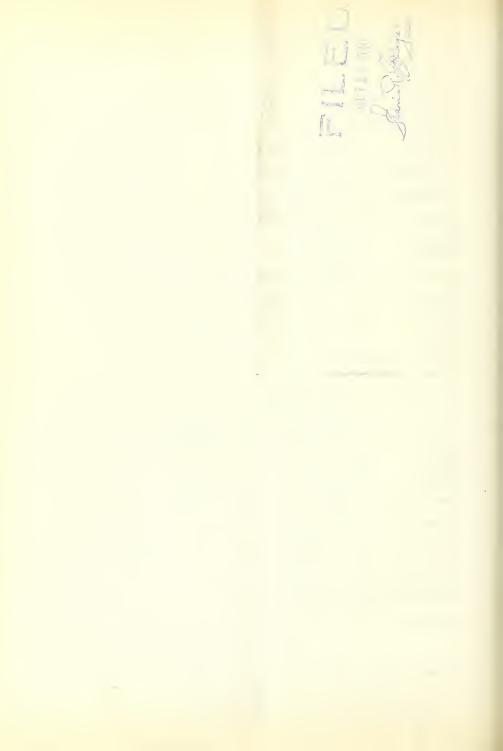
To Be Returned by the Minister or Other Person Performing Ceremony

Frederick Henry Myers and Margaret Ora Youngs
Groom's nameFrederick Henry Myers
His age26
" color
" occupationElect. Engineer Western Elect. Co., Cincinnati
"Birthplace-City_LogansportState_Indiana
"Residence-Street No. R.R. #18, Box #336F.CityIndianapolis
Single Single 1st, 2nd or 3rd Widower marriage 1st
Name of FatherVan Buren Mye <mark>rs</mark>
Maiden name of MotherMartha Ellen Cromwell
Bride's name
" colorwhite
" occupationStenographerState Auto Ins., Indianapolis
"Birthplace-City.Indianapolis State Indiana
" Residence—Street No. 5509 N, Penn. City Indianapolis Single Widow Divorced Single Sing
Name of FatherJames Curtis Youngs
Maiden name of MotherIda May Krohn
Date of this marriage October 19, 1940
Place of this marriage McKee Chapel, The Tabernacle Presbyterian Church Name and title of person Performing this marriage Roy Ewing Vale, D.D., LL.D., Minister The Tabernacle Presbyterian Church His address
Indianapolis, Indiana
Witness Name Mrs. Susan Niblack Mas Susan Miblack
Address 3836 Central Ave., Indianapolis, Indiana



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

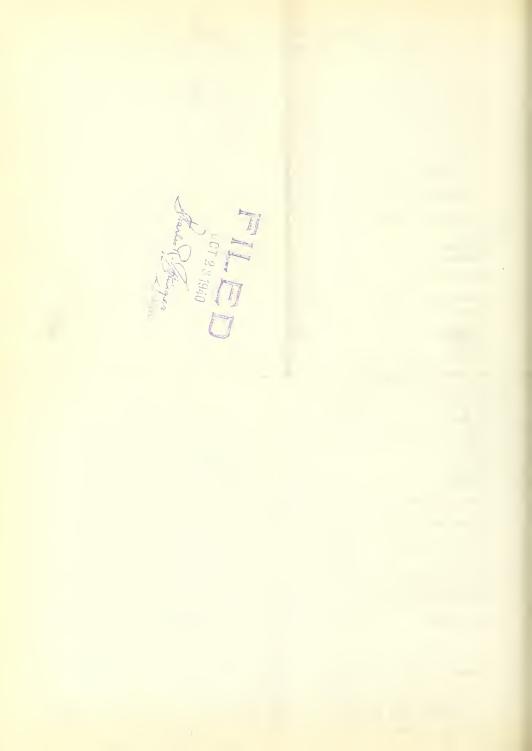
and Groom's name His age 66 color... 44 occupation " Birthplace-State City " Residence-Street No. 1928 ۵ M. City 5 Single Widower 1st, 2nd or 3rd S marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age .. " color..... " occupation " Birthplace State " Residence--Street Nos Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Address Return this Report to Certifida County Clerk with **License** and Wm B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

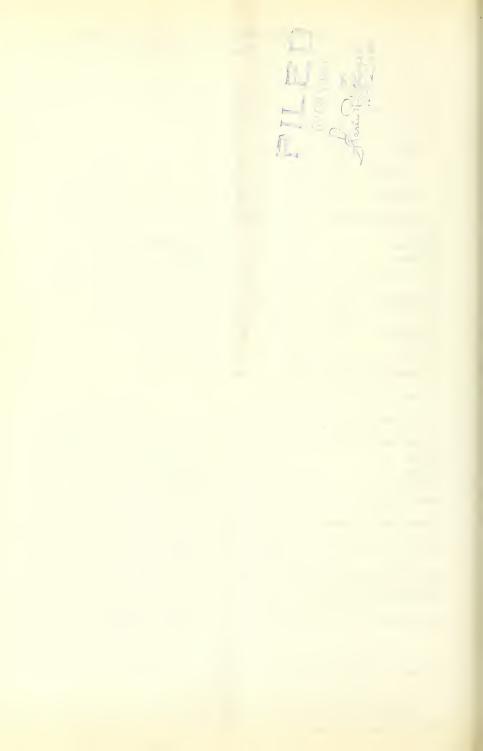
2221 ano and 4 Groom's name His age 66 color... 66 occupation " Birthplace-City State AVE " Residence-Street No. City Single Widower 1st, 2nd-or-3rd marriage Divorced Name of Father. Maiden name of Mother. 20 Bride's name Her age ... 66 color..... A " occupation ... " Birthplace--Ci State " Residence-Street No. City ... Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage Name and title of person Performing this marriage. His address. Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-715



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Kic and Lelle. ras Groom's name 22 His age " color.... 1 " occupation " Birthplace-.Cit State a th t " Residence—Street No. .. 2 20 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Ù Bride's name NO Her age " color. " occupation " Birthplace State 6 " Residence-Street No. 5 15 L....City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother 940 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 18 His address Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name <u>Aarshew Butter</u>
His age
" color
" occupation automobile //she
" Birthplace-CityStateState
" Residence-Street No. 815 Inamelia City Jour Band and
Single Widower Divorced Ist, 2nd or 3rd
Name of Father
Maiden name of Mother
Bride's name
Her age
" color
" occupation Housework
"Birthplace-City_bruttorionState
" Residence-Street No. 747 High City Indianaboli Ch
Single Widow Divorced Ist, 2nd or 3rd marriage Ist, 2nd or 3rd
Name of Father
Maiden name of Mother
Date of this marriage Calary 19 - 1940
Place of this marriage
His address. 025 0. 4. 10 furey St.
10 all 11 for
Witness Name Wanty shuth Address glar High st



Marriage Record for Board of Health

3 5

To Be Returned by the Minister or Other Person Performing Ceremony

Charles V. Clark and alice beaman
Groom's name Charles V. Clark
His age 5 3
" colorUhite
" occupation lasfertin
" Birthplace_City_ Inuinelle_ State_ Kinturky
"Residence-Street No. 3. 2 0 8. Nalmut City Indich spalis
Single Widower Divorced
Name of Father aleahai Cloak
Maiden name of Mother Ancan Hensley
Bride's name alice Seamon
Her age
" colorNhite
" occupation hmachuper.
" Birthplace_CityAland, State
" Residence-Street No. 2216 tallett City Indrangilis
Single Widow Diversed C Ist; 2nd er 8rd merringe
Name of Father durand Marphy
Maiden name of Mother Elizabith mª Dinty
Date of this marriage
Place of this marriage Indranghis Caulidral Actory
Name and title of person Rev. James G. Huky
His address. U13479. Mindian
Indranaphis, Indrane
Name frach Kurker - many me Dowell
Witness Address BOE. 22nd 22397. Delaons



Marriage Record for Board of Health

246

To Be Returned by the Minister or Other Person Performing Ceremony

Robert Rogers and Orie Lee Cook
Groom's name Robert Rogers
His age 32
" color White
" occupation Laborer
"Birthplace-City Indianapolis State Ind
" Residence-Street No. 1702 Lockwood City Judianapolis
Single Widower Divorced Single { 1st, 2nd or 3rd marriage } / st
Name of Father Bay and Rogers
Maiden name of Mother Sarah Barnett
Bride's name Osie Lu loook
Her age
" color Sthite
" occupation
" Birthplace_City_JableanState Ky
" Residence-Street No. 1871 Shelly City Indianapolis
Single Widow Divorced
Name of Father James Luvis
Maiden name of Mother Eelizabeth Darling
Date of this marriage Act. 19, 1940
Place of this marriage Indianapolis, Ind Name and title of person Performing this marriage Pur. R. A. Mc Cauce
His address 234 N. Delaware
Indianapolis Ind.
Name Eithel M. Stirt
Witness Address The Ardnine Indianapolis and



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony, and Groom's name His age " color..... Э 44 occupation____ State " Birthplace---City. " Residence—Street No. Single 1st, 2nd or 3rd n Widower marriag Divorced a Name of Father.... Ż Maiden name of Mother. Bride's name Her age ... " color... u 0 " occupation. / State " Birthplace—City " Residence-Street No. ŧv Single 1st, 2nd or 3rd Widow marriage Divorced nu Name of Father. Maiden name of Mother..... Date of this marriage..... Place of this marriage.... Name and title of person Performing this marriage His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and c Groom's name His age ... 46 color. 66 occupation. " Birthplace-Cit " Residence-Street No City nd Single Widowe**r** 1st, 2nd or 3rd marriage Divorced a Name of Father. Maiden name of Mother Bride's name Her age .. 44 color... 7 44 occupation. Stat " Birthplace-" Residence—Street No Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father.... Maiden name of Mother.... Date of this marriage..... Place of this marriage..... Name and title of person Performing this marriage His address. Name Witness Address

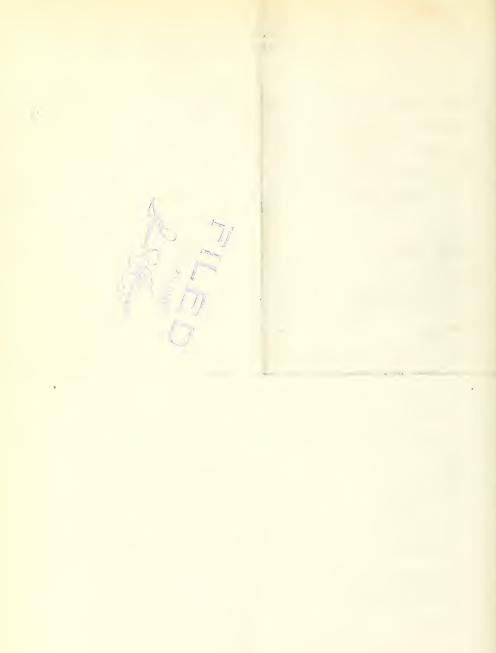


-

.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color.. " occupation " Birthplace-City State 10 " Residence—Street No City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. na Bride's name Her age ... " color..... " occupation State " Birthplace-" Residence-Street No City 1 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father... A Maiden name of Mother. Date of this marriage ... Place of this marriage ... Name and title of person Performing this marriage His address Name Witness a ddress



.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. 44 occupation " Birthplace—City. State 6 Cast " Residence-Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father... Maiden name of Mother Bride's name Her age " color.... 44 occupation " Birthplace-State " Residence-Street No Single Widow 1st, 2nd or 3rd A. marriage Divorced Name of Father. Maiden name of Mother Laura Date of this marriage Place of this marriage Name and title of person Performing this marriage His address Name Witness ddress

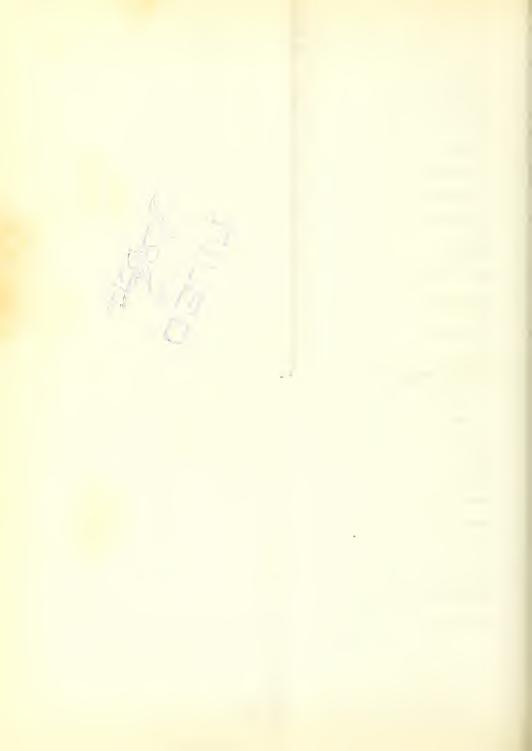


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ouis A. Thompson j and Mary Humke Louis A. Thompson for Groom's name ... His age " color. " occupation m " Birthplace--City State " Residence-Street No. 510 n. Fess City Single Widower 1st, 2nd or 3rd marriage Divorced Tha Name of Father. Maiden name of Mother Mary Humke Bride's name . 27 Her age " color.... 44 occupation " Birthplace-State City..... W. Wayne " Residence—Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Qa 40 Date of this marriage. theto Place of this marriage. Name and title of person Performing this marriage... 15 His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Bettie malo Freeland a Jan Free Groom's name 3 1918 sust His age 2 Une " color " occupation A rosper " BirthplaceartState City. enni raspect. City ... 3 4 " Residence-Street No. Indiano Single Widower 1st, 2nd or 3rd Sinale marriage Divorced daar + 0 rul Name of Father.. kh abell Maiden name of Mother ړ 10 nari Nate Bride's name at. 21, 1920 Her age 19 years " color While " occupation Treat Silk " Birthplace-City... unceState diana th " Residence-Street No. //// ast City . ianapoli Single Widow 1st, 2nd or 3rd marriage Divorced note Name of Father. us Maiden name of Mot ance ood QCI Date of this marriage... 216 rdiana well Place of this marriage.... Name and title of person egno Performing this marriage. 2. His address. ndianaful no Name Witness Address



and l Groom's name His age " color_____ " occupation " Birthplace--Citv and State ndian " Residence—Street No. 40City Single Widower 1st, 2nd or 3rd m marriage Divorced Name of Father Maiden name of Mother. Bride's name .. inc Her age " color......↓ " occupation len " Birthplace_ -City. nchiana State / r l e e " Residence—Street No.X cma. City Single Widow 1st, 2nd or 3rd nu marriage Divorced Name of Father...... re n Maiden name of Mother Date of this marriage Place of this marriage ... ne Name and title of person Performing this marriage. His address Name . Witness Address

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name 3 His age ... " color. " occupation " Birthplace State a " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father the Maiden name of Mother il. Bride's name 2 3 Her age " color. " occupation " Birthplace A State " Residence-Street No. Ŀ ey City 🛒 Single Widow 1st. 2nd or Srd marriage Divorced Name of Father. Maiden name of Mother. 0 ¥L Date of this marriage Place of this marriage. Name and title of person Performing this marriage. 3 ۵ His address Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and re ugene Groom's name His age " color... tendant " occupation Ċ ____State _____ " Birthplace diana Street No. 301 h " Residence-.City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. nur ldre Bride's name ne La Her age " color..... " occupation. " Birthplace-City..... Le State ____ 20 land "Residence-Street No. 5730 Wash City ____ ua abo Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother... 94 Date of this marriage..... 01 Place of this marriage. 60 Name and title of person Performing this marriage. His address. Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Theodor chall Groom's name His age " color. dri occupation eansp d Birthplace 4-Madison Wol City a. " Residence--Street No. 181 Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father den a Maiden name of Mother Bride's name 11 Her age " color... " occupation em lis State na "" Birthplace ave. City " Residence-Street No. 70 err a ce Single Widow 1st, 2nd or 3rd marriage Divorced on Name of Father.... an Maiden name of Mother Date of this marriage. 0 6 tim Place of this marriage. Name and title of person ho U. Performing this marriage. 1 His address nin. ndean Name Mu 04 Ind Witness 5 7 Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony hili and me Groom's name . His age 36 color_7 " ** occupation " Birthplace State #12 1512 " Residence-Street No City Single Widower 1st. 2nd or 3rd marriage Divorced 0 Name of Father bre Maiden name of Mother. Her age <u>30</u> " occupation. 44 NOR is " Birthplace-State -City 42 U " Residence-Street No. 17 City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 940 Octob Date of this marriage. Place of this marriage Name and title of person Performing this marriage. 1 His address 5045 Witness na Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-779



326

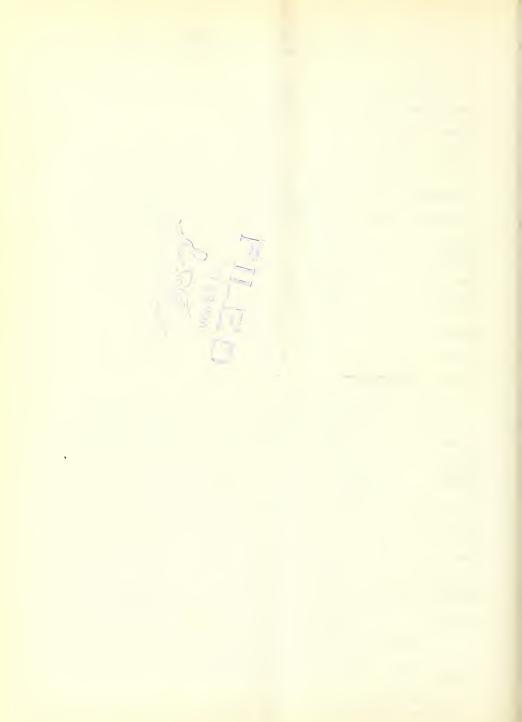
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name William anson Boswell
His age 2.3
" color relieft
" occupation Salesman
" Birthplace-City chiliquapolise State City
"Residence-Street No. Waadruff Place City Indianapolio
Single Widower Divorced Ist, 2nd or 3rd Marriage Ist
Name of Father Admine Chareney Boawelf
Maiden name of Mother
Bride's name Maybelf and Stark
Her age V
" color
" occupationClerk
" Birthplace-City eludianapolia State chidiana
" Residence-Street No. R. R. 11 Box 411 City Indianapatia
Single Single { 1st, 2nd or 3rd marriage }
Name of Father Walter C. Stork
Maiden name of MotherMaybell Stilz
Date of this marriage actor 19, 19, 40
Place of this marriage indraudfalis, indiana Name and title of person Performing this marriage Celyde ABlack, Minister
His address Ritowedstown, Judiana
Witness Name tohun C. Bourle fr.
Address 161 > Beverly Dr. Uwalla, California
Return this Report to County Clerk with License and Certificate

Wm. B Burford Printing Co., Indianapolis-728



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Vonre Ruth ... and (an ens old Groom's name His age 2 " color..... " occupation. anappin " Birthplace-City lana State _ 20 " Residence-Street No. Jana City N Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. varages Bride's name m Her age .. " color... ekeeper 46 occupation County State 44 Birthplace-CRA anarow " Residence-Street No. / City \ ar Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. ctoby 19-19 L Date of this marriage. Jana Place of this marriage... Name and title of person Mas Performing this marriage His address rgswort Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony arman and Louis ina iar IDA Groom's name . 3 His age ... " color. and "" occupation " Birthplace " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father mart Maiden name of Mother... use ama Bride's name Her age . " color. "" occupation hour " Birthplace 1.0 State " Residence-Street No. 0 City Single Widow 1st, 2nd or 3rd marriage Divorced mai Name of Father Maiden name of Mother tu 9 6 Date of this marriage. \cap Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address

3

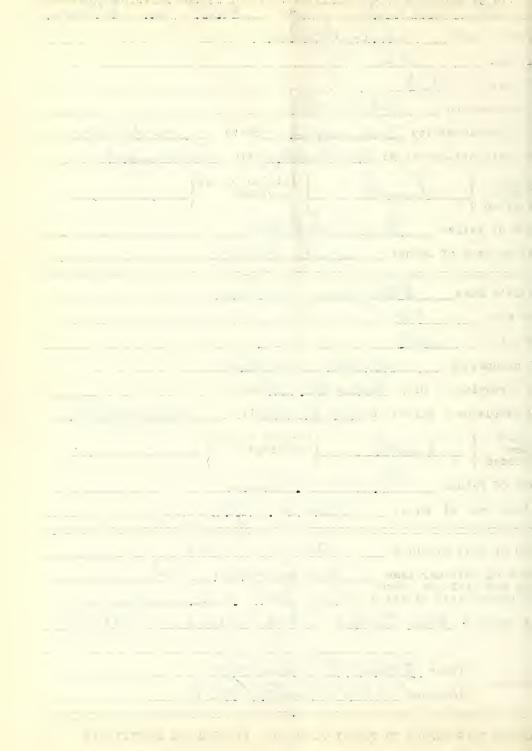
D HALL •

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony lari and Jara Groom's name His age " color Repaires ture. occupation " Birthplace rappoleState Street No. 33026 32 S. City " Residence-Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father C Maiden name of Mother... Bride's name Her age " color.... occupation 44 " Birthplace State " Residence-Street No. 3240 nee City Single Widow 1st, 2nd or 3rdmarriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage 20. Name and title of person Performing this marriage. una His address. Nay Name Mr. + Mrs Scott Mas Witness Address 1429 Comme

Return this Report to County Clerk with License and Certificate Wm. B. Burford Printing Co., Indianapolis-728



Rerforming/Ceremony Other the Minister 01 Returned Be h TO An and X Groom's name his age " color occupation 11 Birthplace-City Sudians 5 State tt " Residence-Street No. 5683 Whithro C ity lst. 2nd or 3rd Single iage Widower Divorced Name of Father 6 ٥ Maiden name of Mother Bride's Name 24 Her age " color Doutal assitand " occupation YOU State " Birthplace - City Carson-Cils " Residence - Street No.36/5 ity Qu (1st,2nd or 3rd Single gle marriage Widow Divorced N. Koy Name of Father Maiden name of Mother 1940 Q Date of this marriage Place of this marriage Name and title of person Performing this marriage 26 His address (Name Witness (Address



Marriage Record for Board of Health

		1
	-	
and a	-	
B1		

To Be Returned by the Minister or Other Person Performing Ceremony

Robert William Parker and Grace Yvonne Jarvis
Groom's nameRobert_William_Park <mark>er</mark>
His age23
" colorWhite
" occupationDrug_Clerk
"Birthplace_CityDanvilleStateInd.
" Residence—Street No. 3238 No. IllCityIndianapolis, Ind.
Single Single 1st, 2nd or 3rd Widower Ist 1st Divorced Ist Ist
Name of Father Herbert Larne Parker
Maiden name of Mother. Ethel Dooley
Bride's nameGrace Yvonne Jarvis
Her age
" color
" occupationCashier
" Birthplace—CityIndianapolisStateInd.
" Residence-Street No. 512 E 31st St City Indianapolis, Ind.
Single Single { 1st, 2nd or 3rd Widow Ist 1st
Name of Father
Maiden name of Mother ^{Muriel Linn}
Date of this marriage Oct. 20, 1940
Place of this marriage Christ Episcopal Church, On the Circle, Indianapolis, Ind. Name and title of person Performing this marriage Charles A. Heuringhotton. Curate of Christ Episcopal Church
His address 2415 Shelby SI- ap1. 7. Judeanapolis Jud
NameAlleen Ridpath
Witness Address 2613 N. New Jersey St., Indianapolis, Ind.

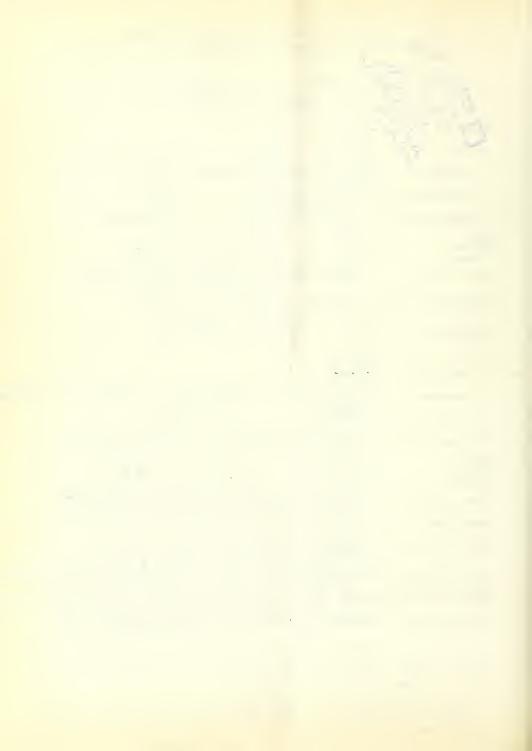
Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-729

20 pm

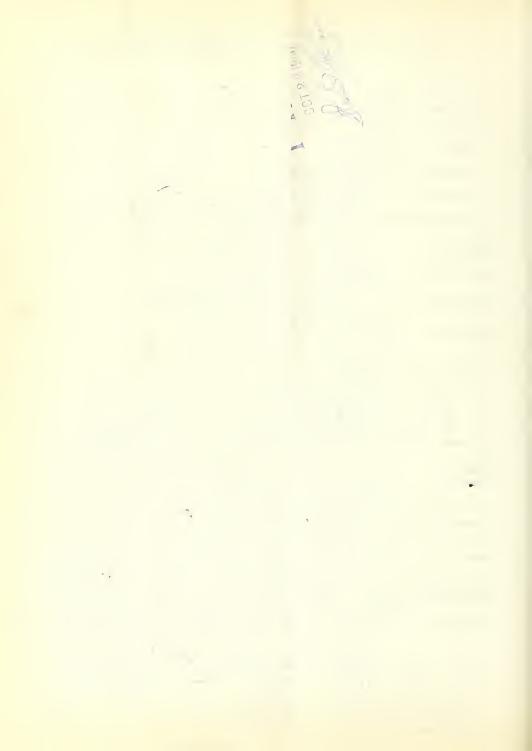


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Harry MI Groom's name . His age " color.. " occupation 4 " Birthplace State " Residence--Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age .. " color... sker. 66 occupation State .. " Birthplace--City " Residence—Street No. 3 3 0 rac and City Single Widow 1st, 2nd or 3rd riage Divorced Name of Father. Maiden name of Mother Date of this marriage. Ws Place of this marriage... V Name and title of person Performing this marriage. 1,0 46 UMan 10 His address Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

.... and IER Groom's name His age " color. " occupation " Birthplace " Residence-Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. R Bride's name Her age " color. " occupation " Birthplace-City State " Residence—Street No. Single Widew 1st, 2nd or 3rd marriage Diverced m Ci. Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Harry B Kum Groom's name ... His age " color crane operator " occupation_ " Birthplace_City_ Commiskey State 0 " Residence-Street No. 3 uller City ___ ende Single Widower 1st, 2nd or 3rd si marriage Divorced B Kunlo Name of Father. Maiden name of Mother Dora Wasne Marie Bride's name Her age " color..... e 6 " occupation " Birthplace State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Ð Name of Father. Maiden name of Mother 1a Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness ddrogg

Jeen P. Friger

â

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age ... " color. " occupation. in " Birthplace adap' State an " Residence Street No. Single Widower 1st, 2nd or 3rd un marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color.... m " occupation..... " Birthplace_City State Street No. foundaniton " Residence-City Sin**gle** Wid**o**w 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. 4 51 His address 10 Name Witness ddress

er and a second and a second a I THE A Jes.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name Paymond W. Rubbins
His age
" color
" occupation Julyist
"Birthplace_City Brownstown State
"Residence-Street NoCity
Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Name of Father W. W. Rolbins
Maiden name of Mother Elizateth Hellen.
Bride's name Betty have Smith
Her age 2. 2-
" color
" occupation
"Birthplace_City Tulado State Chies.
" Residence—Street NoCity
Single Widow Divorced { 1st, 2nd or 3rd marriage }
Name of Father Q. E. Smith
Maiden name of Mother Sally Smith
Date of this marriage October 20, 1940
Place of this marriage Induced lie Name and title of person Performing this marriage Cape Pluty, much bill
His address
Witness { Name James Du Cardo mon Wom Cooling Address <u>Lo. Bend</u> . Indunight



To Be Returned by the Minister or Other Person Performing Ceremony Breidenbach and Charlotte Jouise Schmim Jack atto Groom's name Jack Utto Breidenbach His age 24 color whe " lepy lo. - Credi occupation Wonsville " Birthplace-State Boy 409 City "Residence—Street No. R.R# 2 Indianopolis Single Widower ∫ 1st, 2nd or 3rd marriage First Sugle Divorced Walter 9. Breidenhach Name of Father..... alta M. 1a Maiden name of Mother. Charlotte Jourse Achmink. Bride's name " color_ white Co. Saleswoman " occupation Jealis State ____ relia 44 Birthplacerano City_ Bore 778 City In " Residence-Street No. R.M. #17 dianopolio, India Single Widow 1st, 2nd or 3rd shugle tret marriage Divorced Kussell Ar munk Name of Father Maiden name of Mother... mul 20 Date of this marriage. church: Lerte hra tian Place of this marriage ... Name and title of person Performing this marriage. Are-His address. Name Witness Address Return this Report to County Clerk with License and Certificate

Marriage Record for Board of Health

239

Wm. B. Burford Printing Co., Indiauapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony aretiur. 1500 Ircha Ø p. Groom's name His age " color. " occupation 11 State " Birthplace--City City " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father 71 Maiden name of Mother. , n Bride's name 0 Her age . F 11 " color. Λ 66 occupation " Birthplace-State City an " Residence—Street No. City Single Widow male 1st, 2nd or 3rd marriage Divorced V. 5 Name of Father Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Cer Performing this marriage. His address. Name Witness Address





Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Vr.Raymond Pearcy and Miss Florence Taylor
Groom's nameRaymond_Pearcy
His age
" colorlite
" occupation Display manager
"Birthplace-CityIndianaporisStateIndiana
" Residence—Street No. 507 N. Del. City Indianapolis
Single DIVORCED { 1st, 2nd or 3rd Widower Divorced Third
Name of FatherSanford Pearcy
Maiden name of MotherSara Crago
Bride's nameFlorence_TaylorHer age
" occupation Sails lady
"Birthplace—CityIndianapolisState .lidiona
"Residence—Street No. Barton Hotel City Indianapolis Single Widow DIVORCED { 1st, 2nd or 3rd marriage Prind
Name of FatherWilliam_Barker
Maiden name of MotherCatherine Haag
Date of this marriage
Place of this marriage Z10 Zast Twenty Third St. Indianapolis, Ind. Name and title of person F.E. Thompson, minister Performing this marriage F.E. Thompson, minister
His address 2151 North Alabama.
Witness Name Killa 13. Haynin

in

Address <u>5133</u>



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color re " occupation "" Birthplace-State 44 10 " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. m Bride's name Her age " color. 0 " occupation " Birthplace-State (" Residence—Street No. 23 City Single Widow 1st, 2nd or 3rd marriage Divorced NUC Name of Father Maiden name of Mother. nal 40 Date of this marriage. Place of this marriage. Name and title of person 8 Performing this marriage 3.35 His address ast Name Witness Address



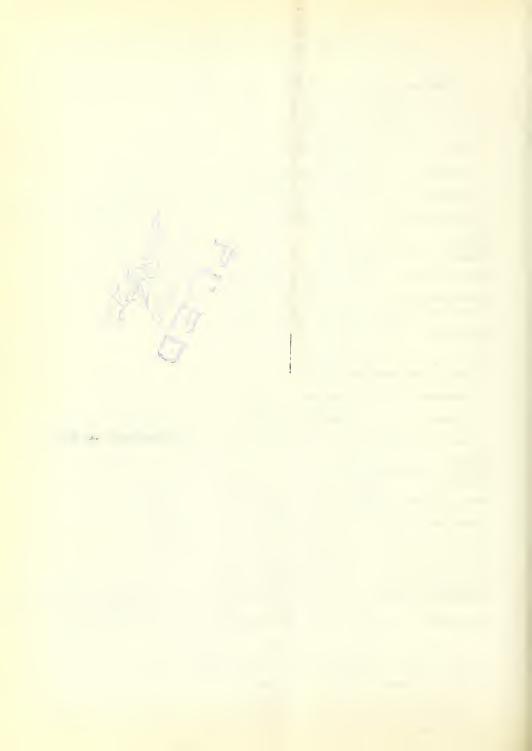
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name 2 His age " color. 66 occupation " Birthplace State 6 " Residence-Street No. 25 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age . " color... " occupation State " Birthplace-6 46 " Residence-Street No. 3 ...Citv Single Widow 1st, 2nd or 3rd marriage Divorced 6 Name of Father. D Maiden name of Mother. Date of this marriage... Place of this marriage... Name and title of person Performing this marriage His address Name Witness ddress

7 - 3



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

ard and Groom's name unto His age " color.... 1 ** occupation State " Birthplace " Residence-Street No. City Single Widower 1st, 2nd or 3rd 1st marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age .. " color. " occupation 1. State " Birthplace " Residence-Street No. herman City Single Widow 1st, 2nd or 3rd mar iage Divorced Name of Father Maiden name of Mother. 21 Date of this marriage 1 Place of this marriage ... Name and title of person Performing this marriage... His address Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age " color... 66 occupation " Birthplace State " Residence--Str No City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father 1-Maiden name of Mother Bride's name Her age . 66 color. " occupation " Birthplace State " Residence—Street No. _City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 9.40 Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address 140 Name . Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

6 Dunn tehsen Groom's name His age 66 color... 44 occupation " Birthplace-State " Residenceeman City -Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother... IMA Bride's name ... Her age " color..... 44 occupation cehra State 70 " Birthplace—City. " Residence-Street No. City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother 6 Date of this marriage A Low Place of this marriage ... Name and title of person Performing this marriage Name and title of person Furna Ch. His address Witness .ddress

シチョ Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and L. Groom's name His age . 66 color 66 occupation ena " Birthplace-City IN tate " Residence-Street No. 1 61 Citv Single Widowe**r** 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color. 46 occupation " Birthplace--Citv _0 State " Residence-Street No 0 City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name Clause 4 Bale
His age 5^2
" color Lh
" occupation manufasture
"Birthplace-City Concernts State N.Y
" Residence-Street No City Buffalor N. 7.
Single Widower Divorced
Name of Father Che - N Bake.
Maiden name of MotherEuropalaal
Bride's name mildred Gezer.
Her age 4 2
" color
" occupation Bank Clink.
"Birthplace-City Birthplace_City State h, Y,
" Residence-Street No City City
Single Widow Divorced { 1st, 2nd or 3rd marriage }
Name of Father Conf. F. Gegn.
Maiden name of Mother.
Date of this marriage Cletche 21, 1940
Place of this marriage Inclusion
Name and title of person Performing this marriage Came Hutte, Munister
His address
Witness Name Ecke hatthew Address Machine ble



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age 46 color. " occupation " Birthplace City tate " Residence-Street No. Citv Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age 66 color. 66 occupation " Birthplace-City. State " Residence-Street No. .City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony in Froom's name His age " color. " occupation " Birthplace 1 " Residence Single Widower 10 1st, 2nd or 3rd Divorced Name of Father ø λ Maiden name of Mother. Bride's name Her age 66 color. cher 64 occupation vlis "" Birthplace State -Street No. 2 / " Residence-City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. LAN Maiden name of Mother 940 Date of this marriage. Place of this marriage... Name and title of person Performing this marriage... His address. 12 Name Witness Return this Report to County Clerk with License and С ertificate



-1'0

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Ralph K. Smit and Houras Groom's name Ralph K . Smith His age 24 " color noaner Pari occupation " Birthplace-City. Sam intenio State Shrwercity " Residence_Street No. 2.1 53 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father..... m m 01 Maiden name of Mother.... Man 140 Houran Bride's name " color negret 44 occupation..... Birthplace_City_ State 66 Jen Shriver City "Residence-Street No. 2153 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father.... rand men Rol Maiden name of Mother.... reco Janns \$ a 4 2 Date of this marriage. С Q And anal Place of this marriage.. Name and title of person Performing this marriage... rel His address Smit Name Witness З ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony mand ql. e, 0 mar phand Groom's name His age ... " color_ ** occupation e in " Birthplace State Street No. / 941 ·1cos " Residence-City Single Widower 1st, 2nd or 3rd marriage Divorced P Name of Father. Maiden name of Mother..... 0 6 Bride's name Her age " color. re " occupation " BirthplaceState " Residence-Street N City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. any. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage, ()His address Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name ... His age 46 color... 66 occupation " Birthplace " Residence--Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother____ Bride's name Her age " color.... 66 occupation " Birthplace-" Residence—Street No Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. a0 Maiden name of Mother. Date of this marriage... Place of this marriage..... Name and title of person Performing this marriage. His address Name Witness ddress

Wm. B. Burford Printing Co., Indianapolis-798



ł

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

350

Groom's name <u>Garl</u> <u>I.</u> Polinson
His age 30
" color white
" occupation Bus, Driver
" Birthplace-City Costerville State
" Residence-Street No. 1024. us. 29 R. St. City Indianizetto
Single Widower Divorced Strington (1st, 2nd or 3rd marriage (1st, 2nd or 3rd)
Name of Father albert O. Solinson
Maiden name of Mother E Mais Minter
Bride's name Mary Jasephine Ward
Her age 2 1
" color_tukite
" occupation other grapher
"Birthplace-City_ Indianafolis State Indiana
" Residence-Street No. 142 n. Driental City
Single Widow Divorced List, 2nd or 3rd marriage
Name of Father Satrick Ivard
Maiden name of Mother
Date of this marriage Oct 22 - 1940
Date of this marriage.
Place of this marriage Holy Gross Church Indianopolis Name and title of person Performing this marriage Rev- Wm F Keefe
His address 125 No Oriental Sr
Judges.
Witness Name Jerald H. Thomas & Margaret P. Ward
Address Address Address Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age " color.. 66 occupation " Birthplace City " Residence--Street N Single Widower 1st. 2nd or 3rd marriag Divorced Name of Father. Maiden name of Mother Bride's name Her age " color... 66 occupation " Birthplace-State -Cit " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony arence Groom's name His age 10 " color..... 66 occupation " Birthplace-State " Residence-Street No ty Single Widower 1st, 2nd or 3rd marr Divorced clas Name of Father 1 Maiden name of Mother. Bride's name Her age ... " color.. " occupation State " Birthplace--Citv " Residence—Street No. Single Widow 4 1st, 2nd or 3rd Divorced Name of Father 1 CAI Maiden name of Mother. Date of this marriage... Place of this marriage... Name and title of person Performing this marriage. His address.. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color... " occupation " Birthplacetate " Residence-Street No. Citv Single ⊬ Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color... " occupation " Birthplace-City un State " Residence—Street No. ...City Single L Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness ddress



-. -.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and lug Ca. Groom's name His age " color... 66 occupation " Birthplace—City State " Residence—Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age ... 66 color... 44 occupation " Birthplace--City. State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother Date of this marriage... Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Robert JClay and Barbara Ballinger
Groom's name Robert J. Clay
His age 25 yrs 3 mos.
" color
" occupation <u>Salesman</u>
"Birthplace-City Burnettsrille State Indiana
" Residence-Street No. 1328 Broadway City Logans port. Ind.
$ \left. \begin{array}{c} \text{Single} \\ \text{Widower} \\ \text{Divorced} \end{array} \right\} \begin{array}{c} \text{Single} \\ \text{Marriage} \end{array} \left\{ \begin{array}{c} \text{1st, 2nd or 3rd} \\ \text{marriage} \end{array} \right\} \begin{array}{c} \text{yst}^{+} \\ \text{yst}^{+} \\ \text{marriage} \end{array} \right\} $
Name of Father George H. Clay
Maiden name of Mother Charlotte Margaret Irvin
Bride's name Barbara Ballinger
Her age 23 yrs 11 mgs.
" color White
" occupation Office Secretary
"Birthplace-City Indianapolis State Indiana
" Residence-Street No. 32.33 Central Ave City Indianapolis, Ind.
$ \begin{cases} Single \\ Widow \\ Divorced \\ \end{cases} \begin{cases} 1st, 2nd \text{ or } 3rd \\ marriage \\ \end{cases} \begin{cases} 1st, 2nd \text{ or } 3rd \\ marriage \\ \end{cases}$
Name of Father Arthur L. Ballinger
Maiden name of Mother Caroline Graves
Data of this marriage $Q_{c}A - 2J - 1940$
Place of this marriage Name and title of person Performing this marriage Rev. John & Edwards
His address 3620 Quieford arts
Sudianopolis Sudiana
Name Milliam Edwin Ash,
Witness Address 3721 n. miridian St.

· . .



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 mi and Groom's name His age " color. ** occupation " Birthplace-State " Residence--Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother en Bride's name Her age " color..... 0 66 occupation. " Birthplace--City State " Residence—Street No. A City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 4 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness au ddress



•

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1 Groom's name His age . " color. 44 occupation " Birthplace-Sto L -Street No. " Residence-Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color..... "' occupation a State " Birthplace-Ci " Residence-Street No Single Widow 26 1st. 2nd or 3rd marriage Divorced Name of Father. und Maiden name of Mother. Date of this marriage.... Place of this marriage.... Name and title of person Performing this marriage... His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age . " color. 66 occupationState " Birthplace--City " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color..... 66 occupation State " Birthplace-" Residence-Street No Sin**gle** Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage.... Place of this marriage... Name and title of person Performing this marriage. His address... Name Witness ALA Address

IJ her yer 1011

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony William Mª Ca Groom's name Williamo 15 p His age /9 " color_ occupation gen 46 " Birthplace-City (State " Residence Street No. 460 Menu City 🤤 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color. " occupation _____ " Birthplace-1/31 " Residence-Street No. ... Citv Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother u 40 Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address Name Witness Address



To Be Returned by the Minister or Other Person Performing Ceremony
Robert Kramer and Florence Millilion
Groom's name Jobert Aramen
His age 30
" color
" occupation Med Estain Brother
" Birthplace-City Dunnah olis State
" Residence-Street No. Deiroet City Michigan
Single Widower Divorced Ist, 2nd or 3rd
Name of Father Trancis B AFramer
Maiden name of Mother Ernen 74 Zawy
Bride's name Florence M. Wilson
Her age
" colorW
" occupation recorder puer
" Birthplace-City Maywood State State
" Residence-Street No. Maywood City Luch
Single Widow Divorced Ist, 2nd or 3rd marriage
Name of Father Origitus Wilson
Maiden name of Mother Patrona + Balan
Date of this marriage Oct 24 1940
Place of this marriage 15212 & Crewit St
Name and title of person Performing this marriage and read from Monast HP
His address 1521/2 E Court H
(Name
Witness Address

Marriage Record for Board of Health

3:0



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color.. " occupation " Birthplace State " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age 10 " color " occupation. " Birthplace-City State . " Residence—Street No. City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father... Maiden name of Mother Date of this marriage. Place of this marriage.... Name and title of person Performing this marriage His address Name . Witness Address

36



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony udlors sente C. us and Mary Groom's name ober His age " color... " occupation. State " Birthplace-.Citv " Residence-Street N LauCity 210 Single 1st. 2nd or 3rd Widower marriage Divorced Name of Father. IR Maiden name of Mother Vo Bride's name Her age ... " color " occupation lon " Birthplace-City. ra State " Residence—Street No. 9 Lagite ... Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. 1 TTA Maiden name of Mother. (Oct 24 - 1940 Date of this marriage. ianalur 9 Place of this marriage. Name and title of person R 0.1 ann Performing this marriage 3 His address. Name Witness Address Return this Report to County Clerk with License and Certificate

262

Wm. B. Burford Printing Co., Indianapolis-776



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony anno 41 Tresdeman and abert Louc Groom's name 23 His age " color. adius occupation 01 66 Birthplace car × State " Residenceom City Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. 13 Maiden name of Mother. 911sende - 0 Bride's name 20 Her age 9/1 66 color.... 66 occupation enourable " Birthplace State " Residence-Street No. 6 16 11 Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. a Maiden name of Mother Date of this marriage. 91 91 Place of this marriage 21 pole Name and title of person Performing this marriage His address... Name Witness Return this Report to County Clerk with License and Certificate



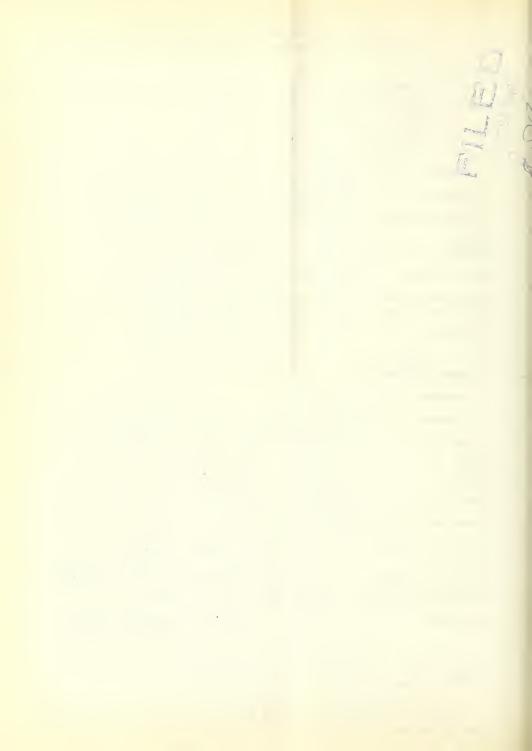
36+ Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Robert lieca and Frances Ellen Le. non Hillow Groom's name His age . " color " occupation. State " Birthplace -City. moton nd " Residence-Street No. City Single Widower 1st, 2nd or 3rd 1s marriage Divorced Name of Father. Maiden name of Mother. n her 2 11 Bride's name in Her age 44 color.. 44 occupation " Birthplace City... State 1224 " Residence-Street No. .City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 4 L Date of this marriage. ra. Place of this marriage.... Name and title of person Performing this marriage... 1 0000 His address. Name Witness ddraeg



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 201 and Groom's name His age 66 color. Ø occupation " Birthplace State " Residence—Street No. City Single Widower 1st, 2nd or 3rd 2 marriage Divorced ~ Name of Father Maiden name of Mothe Bride's name Her age . 66 color... " occupation " Birthplace-City State " Residence-Street No. City Single ⊢ Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony iam and Groom's name His age h " color. " occupation ... " Birthplace-City " Residence—Street No. . 0 .City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. a Bride's name Her age " color... " occupation. " Birthplace-City State a " Residence_Street No. 0 1 City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. X n Date of this marriage. Place of this marriage... Name and title of person 01 Performing this marriage His address. Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Pliste the a Groom's name His age . " color. " occupation " Birthplace-Citv Sta " Residence--Street Single Widower 1st. 2nd or 3rd marriage Divorced 10 Name of Father. Maiden name of Mother Bride's name Her age ... " color..... " occupation " Birthplace—City State " Residence—Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address ame Witness Address

56



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Groon's name Marwin Lynn His age 31 " color	and
" colorMachine Eliz " occupationMachine Eliz " Birthplace-City Lay offatt State Ind " Residence-Street No. 1220 Growt City Inducefoli Single Maiden name of MotherMachine Bride's nameMachine Advanted Bride's nameMachine Advanted " colorMachine Advanted " colorMachine Advanted " Residence-Street No. 1728 Pack CityMachine " Birthplace-City Almost " Residence-Street No. 1728 Pack CityMachine " Birthplace-City Almost " Birthplace-City Almost " Residence-Street No. 1728 Pack CityMachine " Birthplace-City Almost " Birth	A harris A
" color Machine The state of the state of this marriage of this marriage.	His age 3
" occupation Machine This State The State Independence of the state of	
"Residence-Street No. 1220 Arout City Inducepati Single Widower Second Ist, 2nd or 3rd marriage Name of Father. Howal Lynn Maiden name of Mother Jula Midowill Bride's name Mary Lauice Passwoller Her age 20 " color White " occupation. " Birthplace-City alunne State Calando " coupation. " Birthplace-City alunne State Calando " residence Street No. 1728 Park City Inducepati" Single Single Ist, 2nd or 3rd marriage Name of Father. John Raynon Passwole Maiden name of Mother. Elma Mic Cormics Date of this marriage Park and State Construction Place of this marriage Produce Mic Cormics Maidense 1254 window Witness Name level R Conse HIT Bernard Indelaydad Witness Name and Hole Parson Passwole	
"Residence-Street No. 1220 Inout City Induces and the state of this marriage for the state of th	"Birthplace_City_Loyaffett State terd
Widower Levil And the set of the	
Maiden name of Mother Julla Madowell Bride's name Mary Lawie Passworter Her age 20 " color Whites " occupation. " Birthplace-City Dunne State Gelarado " Residence-Street No. 1728 Park City Inducedo " State Inducedo " Residence-Street No. 1728 Park City Inducedo " State Inducedo " Residence-Street No. 1728 Park City Inducedo " State Ind	Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Bride's name Mary Lawie Passweler Her age 20 " color Whites " occupation	Name of Father Howard Type
Her age 20 " color	Maiden name of Mother. Lila Wdowill
" color " color	Bride's name Mary Louise Passwoler
" occupation	Her age 2
"Birthplace-City Imme State Gelarads "Residence-Street No. 1728 Park City Induction Single Widow Single Single State City Induction Divorced Street No. 1728 Park City Induction Mame of Father Street No. 1728 Park City Induction Name of Father Street No. 1728 Park City Induction Maiden name of Mother State Street No. 1728 Park Correct Maiden name of Mother State Street No. 1728 Park Correct Maiden name of Mother State Street No. 1728 Park Correct Maiden name of Mother State Street No. 1728 Park Street No. 1728 Park Correct Maiden name of Mother State Street No. 1728 Park Correct Maiden name of Mother State Street No. 1728 Park Correct Maiden name of Mother State Street No. 1728 Park Correct Maiden name of Mother State Street No. 1728 Park Str	" colorWhite
"Residence-Street No. 1728 Park City Induction Single Widow Divorced Street No. 1728 Park City Induction Maiden name of Mother Induction Date of this marriage Induction Place of this marriage Induction Name and title of person Performing this marriage Induction Name Induction His address Induction Witness Name Cecil R Cong H1720 Bernard Induction Maiden Mothey 1919 Droot biology	" occupation
Single Widow Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Witness Name Cecif R Conce H172Bernard Julk full. Maiden name Cecif R Conce H172Bernard Julk full. Mitness	" Birthplace-City Dunner State Colorado
Divorced) Name of Father. John Raymon Passwele. Maiden name of Mother. Lona Mc Cormue: Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. 1254 windson Witness Name Cecil & Conce H172 Bernard Julkhful Address Itlen Mobley 1319 Drootbude	"Residence-Street No. 1728 Park City Inducpati
Maiden name of Mother. Elona McCornie Date of this marriage. Place of this marriage. Place of this marriage. Place of this marriage. Performing this marriage. His address. Mame Cecil & Correct H1720 Bernard Julph frid. Mitness Name Cecil & Correct H1720 Bernard Julph frid. Address Italen Mobley 1919 Droot Carde	Single Widow Divorced Stringle { 1st, 2nd or 3rd marriage }
Date of this marriage Place of this marriage Name and title of person Performing this marriage His address Witness Name Cecil & Core H172Bernard Julphful Address I Hen Mobley 1919 Droot Lade	Name of Father John Raymond Jassimeler
Place of this marriage Name and title of person Performing this marriage. His address /254 windsor Witness {Name level & long H172 Bernard Julphfrd Address Itelen Mobley 1919 Droot Carde	Maiden name of Mother Elma Mc Corme
Name and title of person Performing this marriage. His address	Date of this marriage Get - 25 - 1540
Witness { Name Cecil & Cone 4172 Bernard Julkhfrd Address THeen Mobley 1319 Droot Criste	Place of this marriage Induced in the second
Witness Address THelen Mobley 1919 Brookside	His address 1254 under
Witness Address THen Mobley 1919 Brootbide	
	Witness Sile and the second state
	Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony runi mous and a Groom's name His age 44 color. " occupation 200 " Birthplace " Residence--Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age " color... 44 occupation " Birthplace_ State -City. 6 " Residence-Street No. 10 City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Date of this marriage Place of this marriage... Name and title of person Performing this marriage. His address Name Witness Address



70 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name w. His age " color. C " occupatio " Birthplace A the State " Residenceľa Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Band Maiden name of Mother... 2. Mary a Bride's name Her age . " color.... " occupation 138 " Birthplace State iana " Residence-Ho -Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced ha u (A i Name of Father. Maiden name of Mother. OSE Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Citi

JULIED JOTZ 1940

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Willi tomur C Groom's name His age " color. " occupation " Birthplace " Residence-Street No. Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 0 Bride's name Her age . 1 " color... " occupation " Birthplace State " Residence-Street N Citv Single Widow 1st, 2nd or 3rd L marriage Divorced Name of Father. ns Maiden name of Mother. Date of this marriage. Place of this marriage. 1.0 Name and title of person Performing this marriage. His address Name Witness Address



37
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
I ale M. Yeager and Rosalie Harrison
Groom's name Dale M.V.Yeager
His age 2 2 /
" color White
" occupation Machinest
" Birthplace_CityCambyState Indiana
" Residence-Street No. Cambry Sity Indiana
Single Widower Divorced } { 1st, 2nd or 3rd marriage } { Jurat
Name of Father Bert 7. Yeager
Maiden name of Mother. Herr Merredenhall

State

Sitv

1st, 2nd or 3rd marriage

20

19

7

м

11

ie

La

0

2.1

an

int

ogat

10

City

Return this Report to County Clerk with License and Certificate

Name

Address

Bride's name Her age " color. "

occupation

" Residence-Street No.

Maiden name of Mother.

Date of this marriage Place of this marriage... Name and title of person Performing this marriage.

" Birthplace

Name of Father.

Single Widow

Divorced

His address

Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Richardson William and trio Inliand Hode Groom's name Ri His age color..... " " occupation " Birthplace-City State " Residence-Street No. 1/20 U Punge City Single Widower 1st, 2nd or 3rd marriage Divorced arry M Name of Father..... Marthe Maiden name of Mother. Mas Bride's name ... Her age " color..... cu " occupation anapolis State " Birthplace 5120 W. 15 Th City Indiana " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother. Sfer 25- 19 40 Date of this marriage. Place of this marriage East Tenth Street Methodist Name and title of person Performing this marriage.... archileso M. B. ter Methodist (in in al ane. In astern His address. Name donie Witness Address



.

.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Otto Martin Ben and Jone Cleanon Groom's name atto Martin Ben, His age ______ 13 White " color..... " occupation Commerce artist les " Birthplace_City_ Indianapa State " Residence-Street No. 6/2 R. De Juney, St City Single 1st, 2nd or marriage Widower Divorced Itto Martin Be Name of Father...... ny S Ber Dorth Maiden name of Mother. Bride's name Jane deanon Ki Her age 21 " color_ White " occupation..... " Birthplace_City_Indianapa State enny dane " Residence-Street No. .City Single 1st, 2nd or 3rd marriage Divorced Name of Father.... Maiden name of Mother Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness ddress Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-728

101 9 1940 last " Hinger

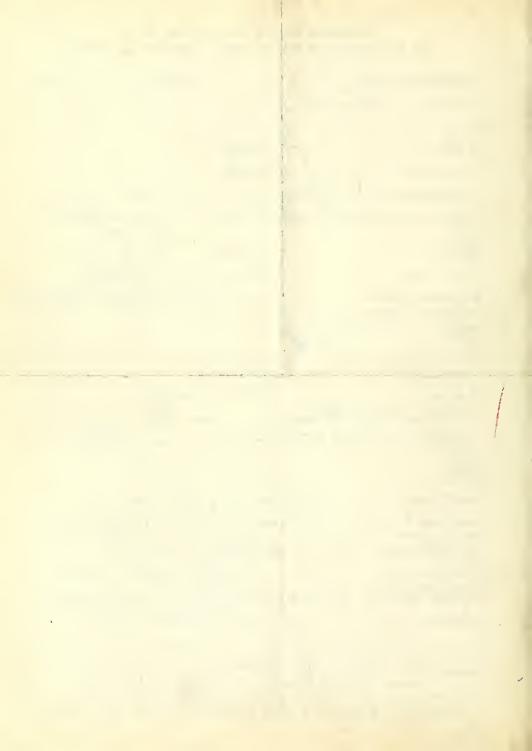
Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Loldi Ino Ralp Ì the Leo +XxxAt and Lyth Groom's name 0 His age " color. occupation an 44 _____State 66 Birthplace 2 " Residence Street No. 50 40 5 City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother n Bride's name Her age . " color " occupation State " Birthplace " Residence-Street ____City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 9 Date of this marriage. polis 9 Place of this marriage... Name and title of person Performing this marriage... His address / 0.7 n Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

asoar orr and Dorth Lie auss Groom's name ascar orr, His age 26
His age
" color
" occupation
"Birthplace_CityIndfloStatede
"Residence-Street No. 2434 Shelden City
Single Widower Divorced List, 2nd or 3rd marriage
Name of Father Pocar L. Arr
Maiden name of Mother Mollie Francis Howe
Bride's name Dorth Lee Russ.
Her age 2_
" colored
" occupation Housenfe
" Birthplace_City_Cynthicana State_Ky
"Residence_Street No. 1962 Carnell City Indfle
Single Widow Divorced 1st, 2nd or 3rd marriage
Name of Father McKinles (Russ
Maiden name of Mother . Alma he Hoque
Date of this marriage October 25-1940
Place of this marriage Indianafolis, Ind. Name and title of person Performing this marriage Seorge Baltimore, Minister,
His address 3053 Station of
Witness { Name Mill N. Kuk Address 2102 East Threnty Fifth St,
Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-779



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony l Groom's name His age . 66 color. "" occupation " Birthplace State City " Residence--Street No m Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age . 66 color. 00 " occupation " Birthplace-City State " Residence---Street N In Single Widow 1 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage..... Place of this marriage..... Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Iliam Lee Chadwick and NO William Su Chaduris Groom's name His age _____ " color..... 66 occupation.... 0 lis 66 Birthplace-State 0 " Residence—Street No. City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color... occupation 66 " Birthplace 1.State 1 " Residence -Street City No Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. $(\cap$ \mathcal{S} v Date of this marriage... Place of this marriage... Name and title of person Performing this marriage. ſ Sm His address Name Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis----

N: DY B TON

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Thank and Groom's name 2 His age " color..... occupation Machine Operator 66 ndianapolio Ø " Birthplace--City State " Residence-Street No. 1203 W. 3 4 City Single Widowor 1st, 2nd or 3rd \overline{a} marriage Divorced Name of Father. Mul 8 Maiden name of Motl ances 1 Bride's name ... Her age .. 66 color... er occupation. 66 Theencash Birthplace-City. State " ualue " Residence—Street No. City л Single 1st, 2nd or 3rd Widow marriage Divorsed enner Name of Father. Maiden name of Mother. 1940 C 5 Date of this marriage. DR ana. Place of this marriage. Name and title of person (Oprestian maler 6 Performing this marriage. ana His address. Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-725



.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Walter E. Lemis and Ever Groom's name in E. Juns His age 20 apis " color..... occupation lan " 10hs State " Birthplace-" Residence-Street No. 108 N SraveCity Single Widower 1st, 2nd or 3rd marriage Divorced Ju Name of Father a 22 Engenie Maiden name of Mother. Bride's name velys a Her age " color... R.C.Q. " occupation ... " Birthplace-State W gr. und " Residence-Street No. Single 1st. 2nd or 9 Widow marriage Divorced Name of Father. Maiden name of Mother. 1.2. 940 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. Σ. 4 01 His address Name Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Violet Leal-Ralph f. Musgrave and Groom's name lph L. Ora uthda His age 29 years next Whi color..... " occupation Press helpes ** State " Birthplace—City..... Easter " Residence-Street No. . Citv Single 1st 2nd or 3rd marriage vorce Widower Divorced U Name of Father. Maiden name of Mother. Violet 00 Bride's name rithday years Her age " color " occupation. appen • " Birthplace-City 0 unna " Residence-Street No. Single Widow { 1st 2nd or 3rd marriage Divorced Name of Father Oro Maiden name of Mother. Date of this marriage. 22 Place of this marriage Name and title of person -Performing this marriage..... 902 His address 1731 Ingram ina in Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony to. Groom's name His age ... 1 " color. " occupation " Birthplace State 0 ス N CI " Residence—Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color. " occupation " Birthplace Cit6 ć " Residence-Street No. Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 1 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage -e His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and 1th Groom's name His age " color " occupation. State " Birthplace—City " Residence-Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age " color... " occupation " Birthplace-State ` " Residence-Street N Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 21 (1) Date of this marriage. Place of this marriage_____ Name and title of person curo Performing this marriage. His address. have Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and 1 Groom's name His age " color. a " occupation_ State " Birthplace-City " Residence-Street No. 2 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother Bride's name Her age ... " color.. " occupation. 1111 9 State " Birthplace-City " Residence-Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father.... Maiden name of Mother_____ Date of this marriage... Place of this marriage. Name and title of person Performing this marriage. His address.. Name ... Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. " occupation State " Birthplace-City " Residence-Street No. City Single Widowe**r** 1st, 2nd or 3rd marriage Divorced clased Name of Father. 1. Maiden name of Mother Bride's name Her age . " color. " occupation. State " Birthplace-City " Residence—Street No. NO Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father... Maiden name of Mother..... Date of this marriage..... Place of this marriage... Name and title of person Performing this marriage His address... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 m 2 Groom's name His age " color..... " occupation " Birthplace-City tate " Residence-Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age . " color... " occupation. " Birthplace-" Residence—Street No. 0 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father_____ Maiden name of Mother.... Date of this marriage... Place of this marriage... Name and title of person Performing this marriage His address..... 1.1 Name Witness Address Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-775



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Eur Unde Groom's name ines His age " color..... Mu 44 occupation emplo " Birthplace-.Citx 11 Carrollom " Residence-Street No City A Single Widower 1st, 2nd or 3rd marriage Divorced Inders Name of Father luna Maiden name of Mother Bride's name ane Her age . " color.... Mi 41 " occupation. State " Birthplace-City... 21. Lau 2 6 au " Residence-Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced U ms Name of Father. 6 aru Maiden name of Mother. az 1л su Date of this marriage. Place of this marriage una Name and title of person n Performing this marriage oms His address. Name Witness ddress



283
Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
TOMALINSON and TRAGESSER
Groom's name Duy Somusion
His age 24
" color
" occupation Dock Kand
"Birthplace-CityState Indiana
"Residence-Street No. 4004 Blod Ol. City Indianapolio
Single Widower Divorced } { 1st, 2nd or 3rd marriage } / et
Name of Father Namon Jomlason
Maiden name of MotherBertha_Thomas
Bride's name Ella Pragusser
Her age
" color
" occupation
" Birthplace-City Alex Laccaster State Adram
"Residence-Street No. RR 13, City adia rophis
Single Single { 1st, 2nd or 3rd marriage }
Name of Father anchony Tragesser
Maiden name of Mother Mary Ripberger
m.t.l. si inil
Date of this marriage October 36, 1940
Place of this marriage male angres Name and title of person Performing this marriage Lw. Joneph L. Some
His address 1827 E. 59ª A
Indiana polio Sad.
Name Paul Pragessed
Witness Address Louise Tragener

DAT 201940 R.arz

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and yer. Groom's name His age 2 " color. W " occupation. mean " Birthplace-State 41 Ku " Residence—Street No. .Citv Single Widower 1st, 2nd or 3rd marriage Divorced 1 Name of Father... -6 Maiden name of Mother Bride's name Her age _____ " color white C. " occupation ... " Birthplace-State 0 " Residence-Street No. 480 P Single Widow 1st, 2nd or 3rd marriage Divorced ran Name of Father. 40 Maiden name of Mother 10 26,1940 Date of this marriage ... es Place of this marriage..... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 60 000 and Groom's name His age _____ " color......? " occupation. hetta alo " Birthplace-City anapoliState 0 " Residence-Street No. 12156. Janman Single Widower 1st, 2nd or 3rd marriage Divorced he rel Name of Father. Maiden name of Mother. Bride's name do Le est Her age " color.... ha adins e " occupation " Birthplace State Vis " Residence-Street No. ar City Single 1st, 2nd or 3rd Widow marriage Divorced 12 Name of Father rod 91220 Maiden name of Mother... stol 26.194 Date of this marriage..... Place of this marriage... Nh Name and title of person Performing this marriage. His address. nab otis ok loon Name Witness ddress aran



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color 10 WH 00 " occupation ... " Birthplacebou City 1 nd State Nus " Residence—Street No. 6... Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. on Maiden name of Mother asema Bride's name A elee. Her age 0 " color.... graf " occupation e " Birthplace-State " Residence-Street No. 6 City Single Widow 1st, 2hd or 3rd marriage Divorced Tar Nee Name of Father Maiden name of Mother. 19 Date of this marriage ... Place of this marriage. Name and title of person Performing this marriage. His address ndu tel man Name Witness ddress and ove



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

389

Quert Tanselle and Heary and by
Groom's name albert Tanselle
His age & &
" colorwhite
" occupation Plack stenanother
" Birthplace-City Boone County State Indiana
" Residence-Street No. Col 9 & Fardice St City Libour, India
Single Widower Divorced Junit (1st, 2nd or 3rd marriage Junit
Name of Father 10. P. Janually
Maiden name of Mother Kussie Easton
Bride's name Mary Univi Wynkwoop
Her age
" color
" occupation Sucretary
"Birthplace-City Lelianon tore State Indiana
"Residence-Street No. ~ 30 Lapracite au City K chonon,
Single Widow Divorced Jist, 2nd or 3rd marriage J tust
Name of Father alva N. Wynkorp
Maiden name of Mother mary filmare
Date of this marriage Octohen 26, 1940
Place of this marriage <u>Lehanong Indiana</u> Name and title of person Performing this marriage <u>James Daniel Martin</u> Minister
His address 223 8 Main St, Lehonom, Ondiana
Name Jean Stewart
Witness Address n. Meridian S. Lelianon, Ind.
Return this Report to County Clerk with License and Certificate

Wm B Burford Printing Co., Indianapolis-726



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony usso and Groom's name a " color " occupation a " Birthplace-City..... ...State Las Lan 10 ua 1. " Residence—Street No. ...City Single ₩idower 1st, 2nd or 3rdmarriage_ Divorced alles Name of Father. Craw 00 Maiden name of Mother sse Bride's name Her age . " color.... an " occupation. " Birthplace--City analy State " Residence-Street No. 3 City -Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father..... mas Maiden name of Mother. 94 ั ล Date of this marriage. Place of this marriage... Name and title of person Performing this marriage 1 His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony phell. and Groom's name His age ... " color..... " occupation. asines m " Birthplace-City..... State M 63 JoldCity trul " Residence—Street No.amo Tarna m Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother -01estrule inte Bride's name Her age . white " color..... 6 Hensu ** occupation_ " Birthplace-City..... State " Residence--Street No. Citv Single Widow 1st, 2nd or 3rd marriage Divorced n (locluse nte Name of Father. Maiden name of Mother. Oct. 26 19 40 Date of this marriage.... Place of this marriage..... Name and title of person Performing this marriage. His address. Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-711



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. " occupation " Birthplace-City. orgelou ~State " Residence-Street No. 447 N. Turston City > Single Widower 1st, 2nd or 3rd marriage Divorced 6 Name of Father. Wallsoth Maiden name of Mother Bride's name Her age " color. " occupation " Birthplace-State & " Residence-20 Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Fathe E Maiden name of Mother. 40 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness Address

Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

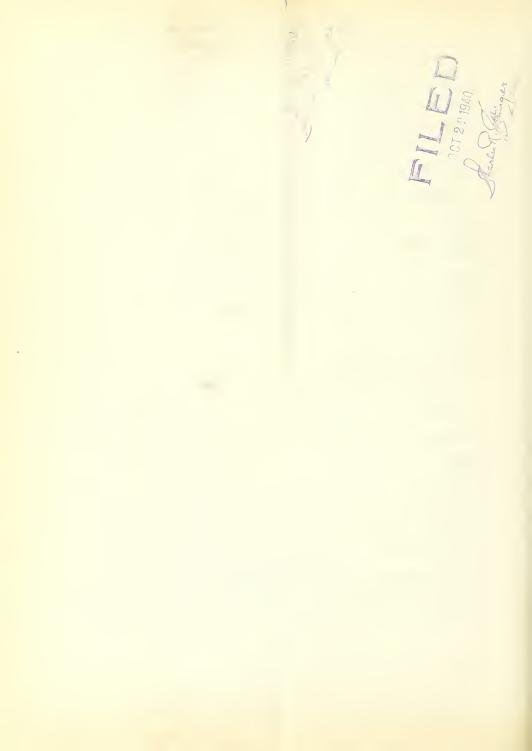
Donal a and long Groom's name His age Whi " color... " occupation in " Birthplace-City " Residence-Street N City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 0N Bride's name Her age 0 " color... " occupation " Birthplace-" Residence-Street City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Fathe Maiden name of Mother 4 Date of this marriage Place of this marriage... Name and title of person Performing this marriage His address , Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 100 12 and Groom's name His age " color.. " occupation " Birthplace-City " Residence-Street No. Single // Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color. " occupation " Birthplace-City State " Residence-Street No Single ⊧ Widow Q 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1100 and Groom's name ... His age " color.. " occupation 100 N " Birthplace State Citv" Residence—Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother nor Bride's name Her age . " color. " occupation ser se ma State . " Birthplace .Cit " Residence-Street City Ne N Single 1st, 2nd or 3rd Widow marriage Divorced ヽ NO Name of Father. Maiden name of Mother Č Date of this marriage. Place of this marriage... Name and title of person Incs 11/10 Performing this marriage. His address ... Name Witness Address



296 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Woodrow Lem and Marin Barnel 12. Groom's name Woodrow Leor His age 2/ " color____/// la Parta occupation ** wand State " Birthplace No. 2030 N. larro " Residence City anal Single Widower 1st, 2nd or 3rd marriage Divorced Ran arth Name of Father... Maiden name of Mother... ٢, Rass Bride's name Mare Barnett W " color occupation_ u ** manvelle " Birthplace-State miley " Residence-Street No. .Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Mart 00. 1940 Date of this marriage les or Place of this marriage..... Name and title of person Dunca Chas. WO er. Performing this marriage... His address. 1 1 1 1 103 Name 🧹 Witness

а.

1

1

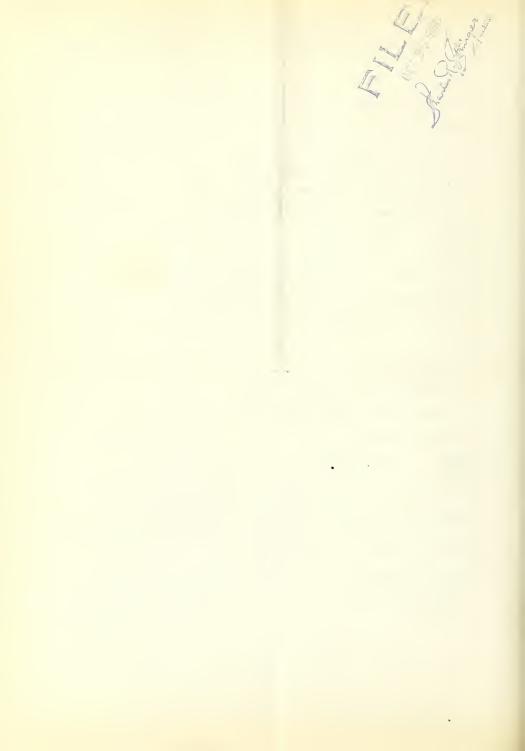
· •

-

297

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and;
Groom's name wm wort Kills
His age 3 >
" color cold
" occupation machingt
" Birthplace_City Indangiles State
"Residence—Street No 13 o 1 Brrackery City
Single Widower Divorced Ist, 2nd or 3rd marriage
Name of Father Z. E. Kelley
Maiden name of Mother Lena Benham
Bride's name Buth man Punel
Her age 3.2
" color
" occupation at from
"Birthplace-City
" Residence—Street NoCity
Single Widow Divorced Surgle { 1st, 2nd or 3rd marriage }
Name of Father Cuthur L. Pansel
Maiden name of Mother narris hroffst
Date of this marriage altore 26,1980
Place of this marriage
Name and title of person Performing this marriage Came Pretty house
His address
Witness { Name anna Scitut Francis Taylor Address Judinizada



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Casha and Groom's name His age " color.... " occupation " Birthplace State " Residence-Street N Single Widower tot, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age . " color. " occupation. " Birthplace State 1 anna " Residence---Street Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address

Wm B Burford Printing Co., Indianapolis-7::



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
- wor a ferrire and here here
Groom's name
His age
" color
" occupation
"Birthplace_City ejern State
"Residence-Street No. 165 A gage City
Single Widower Divorced
Name of Father This a wave The
Maiden name of Mother
Bride's name
Her age
" color
" occupation a
"Birthplace_CityStateState
" Residence-Street No. 14 Change City City
Single Widow Divorced 1st, 2nd or 3rd marriage
Name of Father
Maiden name of Mother
Date of this marriage - 7 - 7 -
Place of this marriage to the There in the number of the person Name and title of person Performing this marriage at the tau t
His address. The W. A Puir F.
Name This 7517 Jacuplunes Lola
Witness Address 77 7 7 Canga 30 5 Wistis'



420

Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
Joseph Staja and Elizabeth Jicro
Groom's name Alfh Stage
His age 2 5
" colorWhile
" occupation Selephone Co.
" Birthplace-City Andreas Progling State Jandeana
" Residence-Street No. 74/ 1/ Johner City Hardcompaling
Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Name of Father Jours Alago
Maiden name of Mother Many Hobeheven
Bride's name fingabeth Sicon
Her age A Le
" color
" occupation Nome
"Birthplace_City Sendianafolio State Indiana
"Residence_Street No. 902/ Handlocity Indianapalio
Single Widow Divorced Ist, 2nd or 3rd marriage
Name of Father Cuchacut Arcand
Maiden name of Mother elizabeth Southansy
Date of this marriage & thates 26, 1940
Place of this marriage Jack Junity durch Name and title of person Performing this marriage few Edutord Bockpold, Baton
His address 36/8 h. St. Clair
, Indianapolis Indiana
Name shank Alogs Indianopulis ind
Witness Address Mongoul Endely Andionopalis and
Return this Report to County Clerk with License and Certificate

· 7

.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

401

and
Groom's name
His age
" color Mila
" occupation Shipping Clurk
" Birthplace_CityHarreyStateL
" Residence Street No. 902 Bitis City Indianapolis
Single Widower Divorced } { 1st, 2nd or 3rd marriage }
Name of Father arthur Poser Hammel
Maiden name of Mother Ausic Hanna Sackman
Bride's name Marian Frances Downs
Her age/8
" color
" occupation none
"Birthplace_City_ Elkhorn State _7/isconsin
" Residence Street No. 133 funta It City Indiana min
Single Widow Divorced Ist, 2nd or 3rd marriage
Name of Father and Walket in the
Maiden name of Mother Man I This Production
Date of this marriage $Qeb = 26 - 1940$
Place of this marriage Induanapoles Jud Name and title of person Performing this marriage nev: 10-4 F Keefe Paston
His address Holy Croas Church, Indianapolis
Witness Name Charles Russell & Virginia Hall
Address Malanapolus



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Chan Jarte Groom's name 33 uns His age " color ... " occupation it State " Birthplace " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age ... UN ite " color... ieti tis " occupation Kevka State C " Birthplace-/]. " Residence-Street No. City Single Widow 1st. 2nd or 3rd marriage Divorced 0 Name of Father. Maiden name of Mother 10 1940 26 Date of this marriage. Place of this marriage. Name and title of person D Performing this marriage. His address Name Witness ddress

a () ()



-

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color..... " occupation State " Birthplace " Residence-Street N City Single Widower 1st, 2nd or 3rd marriage Divorced 1 Name of Father Maiden name of Mother Bride's name Her age " color. 84 occupation " Birthplace-State . " Residence-Street No City _ Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. an Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. ma 1100 Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1 Ann and Groom's name Iranha Mc His age " color... " occupation. " Birthplace State 5 Flelchus and City " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father m. Maiden name of Mother. ws Bride's name Her age 91 " color..... " occupation 7 State " Birthplace-603 E. La than " Residence--Street No. . City Single Widow 1st, 2nd or 3rd marriage Divorced La Name of Fat Maiden name of Mother 2 6 th Date of this marriage. Place of this marriage ... Name and title of person Performing this marriage. His address Name Witness

109



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony RUTT Elle Robert leal Groom's name Robert Seal His age 23 white " color " occupation michanic " Birthplace_City_ Loogootee JulianaState " Residence-Street No. 531 houth Oxford City _ u' Single Widower 1st, 2nd or 3rd marriage 1 st Jungle Divorced Name of Father M. William Maiden name of Mother Elyoberth Walker Ruth Eder Bride's name ... Her age _____ white " color " occupation Alculary " Birthplace_City_ JudiouspolieState " Residence-Street No. 605 hout Ox/m City Sin**gle** Widow 1st. 2nd or 3rd marriage Divorced (PA DOAACO Name of Father..... Maiden name of Mother Bertha 26 Ollober, 1940 Date of this marriage. Idiava hote lan Place of this marriage. Name and title of person Performing this marriage. 1. Las Rev 10-5.6. Dame, Ju iana His address Name ... Witness

05

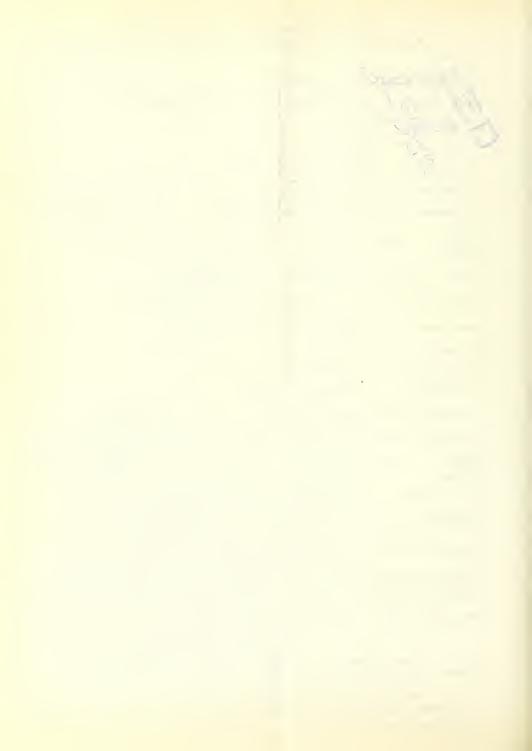
Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color. " occupation " Birthplace-State .Citx 10 " Residence-Street No. -Bitv Single Widower 1st, 2nd or 3rd marriage Divorced o Name of Father Maiden name of Mother. Ø Bride's name Her age ... " color.... " occupation " Birthplace-.Citv tate 2. " Residence—Street N NormanCity Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother ۷ Z 1 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address. Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony isel anna Kirsch Clifford and Groom's name ad Lee In 49 His age White color. ** occupation Paperhauger ovinglow " Birthplace--City.State " Residence-Street No. 1032 5, Sheffield City ____ Single Widower 1st, 2nd or 3rd marriage This Diraced Divorced In Name of Father.... e Maiden name of Mother..... Prudence Ro ensi inche and 1 Bride's name Her age ... " color.... sewa " occupation neti State " Birthplace-1 Kive " Residence-Street No. 12-1 St. ...City Single Widow 1st, 2nd or 3rd marriage Divorced 1A> Name of Father... en Maiden name of Mother..... helt Oclober 26 1940 Date of this marriage..... Place of this marriage_112_1 Ludere St. Indiana Name and title of person Performing this marriage..... Jentin His address 1121 Name Witness Le Address 🖌



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Donald E. Weaver and Virginia G. Fletcher Groom's name Douald &. Weaver His age color..... amos occupation ward County State rdiana " Birthplace udlow City " Residence--Street No. 1720 Single Widower 1st, 2nd or 3rd marriage Divorced ave lorsler Name of Father. Maiden name of Mother. aco rosper tcher Bride's name M am Her age ... " color..... eand clerk occupation State " Birthplace nde and " Residence-Street No. 93 1n. tef Lees an City Single Widow 1st, 2nd or 3rd 0 marriage Divorced harles 0 Name of Father.... L. Maiden name of Mother. in este clober 26, 1940 Date of this marriage... Chur n Place of this marriage Name and title of person 9 Performing this marriage n 1 His address /12/ uda adanapole eldred. Witness Indian



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color " occupation " Birthplace--City ate " Residence-Street No.3/0 City Single Widower nd 1st, 2nd or 3rd 21 marriage Divorced Name of Father Maiden name of Mother in Bride's name Her age " color " occupation an 76 " Birthplace-City. ano State State " Residence-Street No. / 4 2 3 10 City _ 1221 Ush Single Widow 1st, 2nd or 3rd 2 marriage Divorced Name of Father. a Maiden name of Mother C Date of this marriage. Place of this marriage Name and title of person Performing this marriage His address Name Witness D. ddress



410 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ofat . and 1 les Groom's name ... His age ... " color. occupation hlin " Birthplace 9542.1 Im " Residence-Street. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color 66 occupation. nou " Birthplace 0 State " Residence--Street Single -Widow 1st, 2nd marriage Divorced U Name of Father. Maiden name of Mother. 26 1940 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Name Witness un



11,1 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Elas Eagleh and Annamae Moore ETao Edalen Groom's name His age _____/ K " color 11 " occupation Ldjorer -City Martin Co. State fize. " Birthplace-"Residence-Street No. 422 N. Spring City Indianapolis Single Widower Divorced ∫ 1st, 2nd or 3rd marriage Single First Fd Edaler Name of Father..... Maiden name of Mother. Alta Phelps Bride's name Annande Moore Her age " color White occupation. House Keeper "" Indianapplis State Indiana " Birthplace-"Residence-Street No. 1/08 Southeastern City Indianapo /15 Single Widow $\int 1$ st, 2nd or 3rd First marriage Divorced Moore St. Name of Father U sc Maiden name of Mother... hompson drd 1940 Date of this marriage... 2 Place of this marriage. Name and title person 1. Munder Hola Performing this marriage. His address. tuo is. . Name Witness e.

122 200	Wm.	B. 1	Burford	Printing	Co.,	Indianapolis	-



4/2

Marriage Record for Board of Health

To Be Returned by the Minister or Other Person Performing Ceremony



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 2 lask ... and erl Groom's name James 20 His age " color... " occupation outh Binc " Birthplace State Ro 330 eng " Residence-Street No. City ... 1ana Single Widower 1st, 2nd or 3rd marriage Divorced C ohr Name of Father U Maiden name of Mother a a Bride's name Her age ... " color... - Ľ in " occupation ru " Birthplace-State Whi -Street No. 727 " Residence-CombCity Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. 10 Maiden name of Mother Date of this marriage. 1 Place of this marriage 4164 Name and title of person Performing this marriage. His address. glon ho 2 Name Witness



41

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Vencil Les Mattingly and Catherine Vatterson
Groom's name Mirice Leo Mattingy
His age
" color
" occupation Clerke
"Birthplace-Cityndransfer State
" Residence-Street No. 714 E new York City Indiana fusition
Single Widower Divorced } {1st, 2nd or 3rd marriage }
Name of Father (Idrian gr. Mattingly
Maiden name of Mother Mabel Love 7 Leming
Bride's name Catherine Patterson
Her age
" color
" occupation terrog superior
" Birthplace_City_Montgomery which State
" Residence-Street No. 10 11 7 Oxford City
Single Widow Divorced Ist, 2nd or 3rd marriage 1st, 2nd or 3rd
Name of Father Milus 4. attenson
Maiden name of Mother Mary Gandard
Date of this marriage alch 26, 19,40
Place of this marriage 2191 avoidale Pl. Indianopoles Name and title of person Performing this marriage Rev. Manine Egloff
His address 2191 avondale Pl
Witness { Name Slumman Sluidan - 1020 & Markeh Address Marjorie Sheridan - 1020 & Markeh
Return this Report to County Clerk with License and Certificate

FILED OUT 201940 Arander Withinger

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and 1NP/ Groom's name His age " color. " occupation " Birthplace-State " Residence-Street No tv Single 🖌 Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age . " color.... " occupation " Birthplace ate " Residence-Street No. Citv Single L 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address. Witness Return this Report to County Clerk with License and Certificate

Wm. B. Burford Printing Co., Indianapolis-729



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony ans and 57 Groom's hame His age " color " occupation " Birthplace-State " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father... Maiden name of Mother. Bride's name Her age . " color.. " occupation Coate " Birthplace-Ci " Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage Place of this marriage... Name and title of person 0 Performing this marriage His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony e. a Groom's name His age " color. " occupation 13 " Birthplace Cit " Residence-Street No Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 1 Bride's name Her age . " color .. " occupation " Birthplace State " Residence-Street 1 Single Widow 1st. 2nd or 3rd marriage Divorced 10 Name of Father Maiden name of Mother 9 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage ~(1 15 His address Name Witness Address

-, -

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color " occupation " Birthplace tate " Residence-Street No. 0 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age ... " color.... " occupation " Birthplace State " Residence-860 -Street No. **LAM**City Single Widow Divorced 1st, 2nd or 3rd marriage Name of Father Maiden name of Mother -0 Ŕ Date of this marriage. Э Place of this marriage_ Name and title of person Performing this marriage..... His address Name Witness ddress Return this Report to County Clerk with License and Certificate

Wm B Burford Printing Co., Indianapolis-729

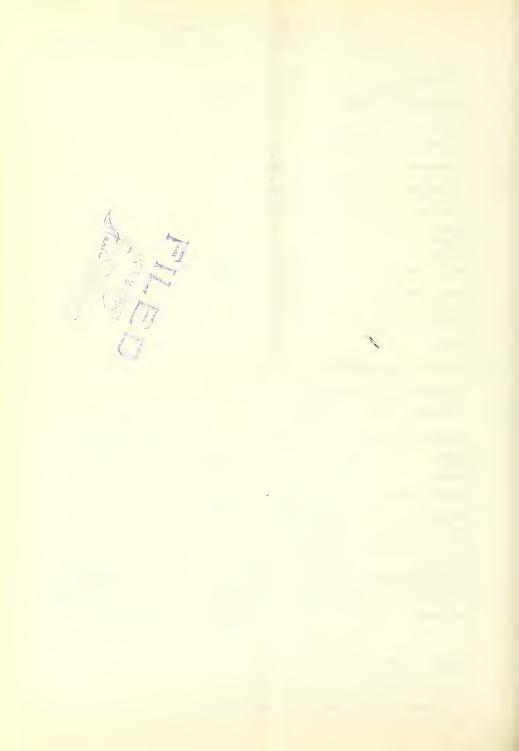


.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 and Groom's name His age ... " color. " occupation " Birthplace State " Residence-Street No City Single ⊢ Widower P 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age .. "" color. 44 occupation " Birthplace--City State " Residence—Street No 11 0 Citv Single Widow 4 a 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony relace 1 Chlain and ica mc Clair Groom's name NO 3 His age Whi " color " occupation " Birthplace--City State " Residence-Street No. Single Widower 1st. 2nd or 3rd Ku marriage Divorced Ø Name of Father 66 Caldwel Maiden name of Mother. Bride's name 1 Her age " color.... " occupation " Birthplace-State 0 " Residence—Street No. ... d Single Widow TU 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. al Date of this marriage. Place of this marriage 2025 Name and title of person Performing this marriage. id His address. mer Name ... Witness 21 0 ddress



Marriage Record for Board of Health

417

To Be Returned by the Minister or Other Person Performing Ceremony

and
Groom's name Roter L. Damcan
His age 2 J
" color. White
" occupation_ <u>Baker</u> .
" Birthplace-City <u>Greenwood</u> State <u>Ind</u> .
" Residence-Street No. 23 612 Prospert. City Andiana polis, Ind.
Single Widower Divorced }
Name of Father Charles Dimean
Maiden name of Mother Iva Satella Perkinson
Bride's name Margaret Schnam
Her age / 9
" color. White.
" occupation
"Birthplace-CityIndrianappli's StateAnd
"Residence-Street No. 1747 Hoy Fare City Indianapolie, chil.
Single Widow Divorced Ist, 2nd or 3rd marriage First
Name of Father W. A. Schwarn
Maiden name of Mother <u>Fronke</u> Dillman
Date of this marriage October 26, 1940
Place of this marriage 1477 And are Indianpolis Ind. Name and title of personAndAnd
His address 1314 Woodlann an Andianepoliz Bal.
Name Ehas Ann can W A Schmoore
Witness Address 2 3 6/2 Prospect
Return this Report to County Clerk with License and Certificate

FILED Internation ~~ 人」に見ば

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name His age 27 " color... " occupation " Birthplace " Residence--Street City Single 1st, 2nd or 3rd Widower non marriage Divorced h Name of Father Maiden name of Mother on e. met le rge Bride's name . Her age " color Fore sperato " occupation. " Birthplace-City.... Chigo re State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. 22 Maiden name of Mother. ate Date of this marriage Word Place of this marriage 15 Name and title of person Performing this marriage. His address. Name Witness



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony . Vu and Va un Groom's name His age " color. " occupation. un b " Birthplace_ -City State " Residence-Street No. Zy City Single 1st, 2nd or 3rd 111 Widower marriage Divorced Name of Father Maiden name of Mother Bride's name 6 Her age ... " color..... " occupation " Birthplace-City tate " Residence-Street No City Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father auc Maiden name of Mother 1111 Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and б Groom's name His age .. " color... N " occupation " Birthplace State " Residence—Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age . " color. " occupation " Birthplace ✓ State " Residence-Street No. Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother..... Date of this marriage Place of this marriage. Name and title of person Performing this marriage.... O His address Name Witness x lin Address



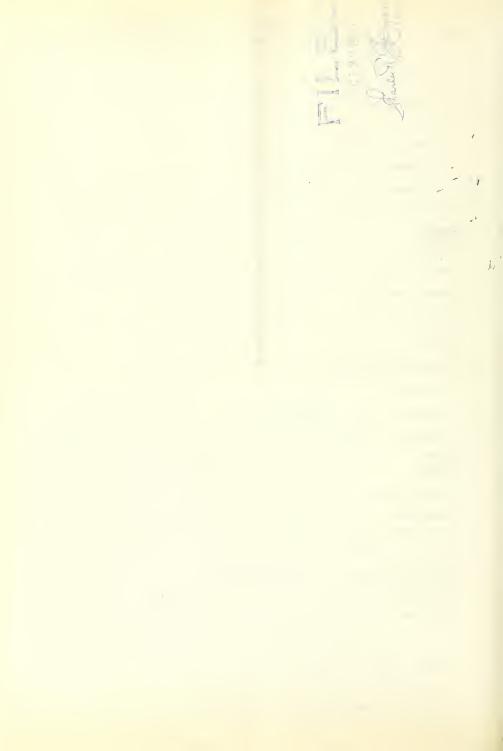
Marriage Record for Board of Health

421

Don & Crisman and June Ballette Magel
Groom's name Crisman
His age 2 C
" color
" occupation Salleman
"Birthplace-City_ AngolaStateState
"Residence-Street No. 210 n. all. City Instranspolis
Single Widower Divorced Ist, 2nd or 3rd marriage
Name of Father Jonas & Cristina
Maiden name of Mother Sena Carpeter
Bride's name Dane Ballette Magel
Her age 2
" colorlite
" occupation
"Birthplace-CityCharafoliaState
" Residence-Street No. 203 E. Vermit City Indianapolis
Single Widow Divorced Sunda [1st, 2nd or 3rd marriage]
Name of Father Colmund C. Magel
Maiden name of Mother Carolina C. Cippetoe
Date of this marriage OCT- 27/940
Place of this marriage Andraine Andrana
Name and title of person Performing this marriage Rev. & Robert Andry
His address 282 Danney avenue
Andrainapolis, Anchaina
Name Gurgella (1 Osler
Witness Address 4631 N. Caulina It Keeg, Sel

Return this Report to County Clerk with License and Certificate

To Be Returned by the Minister or Other Person Performing Ceremony



422

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Nurry E. Bogie and Louise Q. Bogie
Groom's name Neyry E. Bogie
His age <u>38</u>
" color White
" occupation Mail Carrier
" Birthplace_City_ Ranconster_ State Ky.
" Residence-Street No. 660 Eugene St City Indianafolis Ind
Single- Widower Divorced 1st, 2nd or 3rd marriage
Name of Father Jacker Bogie
Maiden name of Mother Mary Leavell
Bride's name Louise 2. Bogy Her age 37
" color_ white
" occupation Beauty Parlor Operator
"Birthplace_City_ Indianopolio State Ind
"Residence-Street No. 427 12th, City Colembus and.
Single- Widow- Divorced Divorced Ist, 2nd or 3rd marriage Ist, 2nd or 3rd
Name of Father Uscar Borg
Maiden name of Mother. Susan Hill
Date of this marriage Detober 27,1940
Place of this marriage Columbus Subjance Name and title of person Performing this marriage J. X. Amith - Minister
His address. 1715 Lafayette ane. Columbus, Sud.
(Name Harry 7. Sillesfie
Witness Address 23 52 Broadway Indianapolis and,



23

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Li Groom's name His age 20 " color. " occupation " Birthplace-City " Residence—Street No. 3 City Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother 1 Bride's name Her age " color. " occupation " Birthplace-State " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 40 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Name Witness



Marriage Record for Board of Health

424

Го	Be	Returned	by	the	Minister	or	Other	Person	Performing	Ceremony
----	----	----------	----	-----	----------	----	-------	--------	------------	----------

and
Groom's name Robert H. Wilson
His age J. J.
" colorhill
" occupation R.R. Employe
"Birthplace_City_ Dalmyra_ State Teen
" Residence-Street No. 5. 5. 9 A. Berull City Juda in appli
Single Widower Divorced } { 1st, 2nd-or 3rd marriage }
Name of Father Dessir Milson
Maiden name of Mother August Len & Hurris
Bride's name balol Brinkeman
Her age
" colorhite,
" occupation Becuty Operator
"Birthplace-City Jung di cing apolis y State & adrin a
" Residence-Street No. 5.929 & 22 ; City Onducingorlis
Single Widow Divorced { 1st, 2nd or 3rd marriage }
Name of Father 6 Curl Joseph Brinkeman
Maiden name of Mother. Alle free anor,
Date of this marriage
Place of this marriage 9 is dian applis Name and title of person Performing this marriage 90 R. F. Lawigen Minister
His address (13131 Party ale
Judienapolis Justiana
Name Robert N. Davis Mary Louise Ting
Witness { Address 1 V + + & Washington Adplo mil R & Baf 210



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Plus Chips and G Paris
Groom's nameMasta
His age
" color
" occupation
"Birthplace-City
"Residence—Street No. <u>330</u> City
Single Ist, 2nd or 3rd Widower Ist, 2nd or 3rd Divorced Ist, 2nd or 3rd
Name of Father
Maiden name of Mother hand fan Start
Bride's name
Her age 2.5
" color
" occupation March March March
"Birthplace-City January State
"Residence-Street No. 2621 R
Single Widow Divorced 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Name of Father Mon der O mmer
Maiden name of Mother. Bull Survey
Date of this marriage
Place of this marriage
His address. 2733 Log Log No. 19
Witness { Name lulie Inmere Address 24 21 Blod, Eluce



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name al 1Lord His age " color... " occupation. " Birthplace—City State Ing " Residence-Street No. 329 walCity ndiana Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother m. Bride's name Her age _____ 112 " color " occupation ... her " Birthplace-25State ... manahor -City... ney " Residence-Street No. 2130 City Indrance Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother.. 2 Date of this marriage 20 Place of this marriage lan a Name and title of person Performing this marriage. His address. G ۷ Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony al and Groom's name 9 L His age " color.... " occupation " Birthplace-State " Residence-Street N CitvSingle Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Bride's name Her age ... " color.. " occupation " Birthplace State " Residence--Street City Single Wid**o**w 1st, 2nd or 3rd æ marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name ... Witness Address



20

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

.

William Rook and horme Wall
Groom's name William Rosh
His age 3 2
" colorWhite,
" occupation marcy
" Birthplace_City_Mt. Groweld State_Plan
" Residence-Street No. 12 S. Capeloe City - Manpoly
Single Widower Divorced } durpech { 1st, 2nd or 3rd marriage } decent Name of Father James E, Rush
Maiden name of Mother anna Cashy
Bride's name homa wall
Her age 2-7
" colorwhit
" occupation
"Birthplace_City Lemma State men york
"Residence_Street No. 1906 m Pen-Sity Indraupres
Single Widow Divorced Aluman { 15t, 2nd or 3rd marriage }
Name of Father Chall
Maiden name of Mother Edeth Wilf
Date of this marriage $10 - 9 - 9 - 70$
Place of this marriage US Three Name and title of person Performing this marriage Munich
His address 4244 h. Capitor
Inlan files to
Name Vilen & Parky
Witness { Address 1909 7 Pennsylvanca, Indianapolic Sed .



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Groom's name rong His age " color. " occupation. " Birthplace--City ma " Residence-Street No. itv Single 2nd or 3rd Widower iage Divorced Name of Fath Maiden name of an Mother___ Bride's name . Her age " color..... n " occupation " Birthplaceinc -City.... State " Residence-Street No. Citv Single Widow 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother... Date of this marriage Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

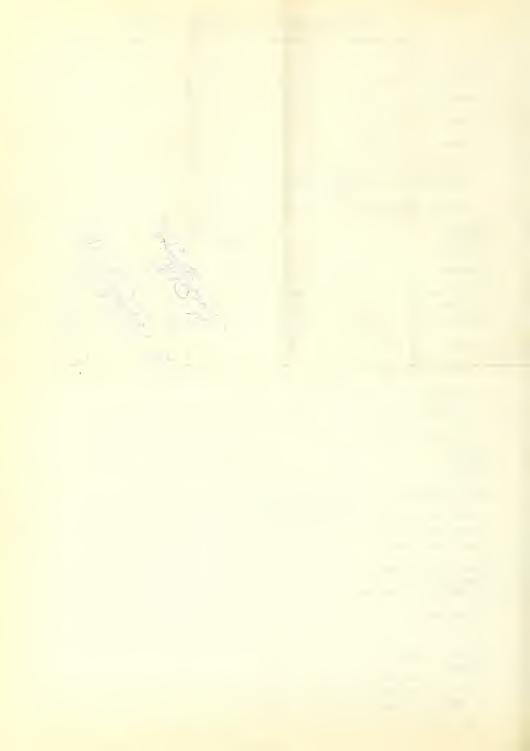
2

Harry	found Wand and Delew survey formit
Groom's n	name/ Harry mead
His age	28
" color	white
" occupa	ation engineer
" Birthp	place-City South and State Indiana
" Resider	nce-Street No. 942 J. Dromerood City South Bund
Single Widower Divorced	} { 1st, 2nd or 3rd ?
Name of	Father agan alden Mind
Maiden n	ame of Mother Martha Euro Detrin
Bride's na	ame Helen Kommitten Julen Karrich & menulle
Her age	28- 29
" color	white
" occup	ation recretary goneral stren work
" Birthp	place-City_ South Be & State Indiana
" Reside	nce_Street No. 1002 0.33 29 City
Sin gle Widow Divorced	} { 1st, 2nd or 3rd marriage }
Name of	Father Levi Konentte
Maiden n	ame of Mother mathicka Kinewiller
	this marriage
· A Nama and	this marriage d title of person ng this marriage
His addr	'ess
Fronewelter	(Name
Vice Witness	Address
. A sure	Cartificato

Return this Report to County Clerk with License and Certificate

they Cer

annette 3220.71

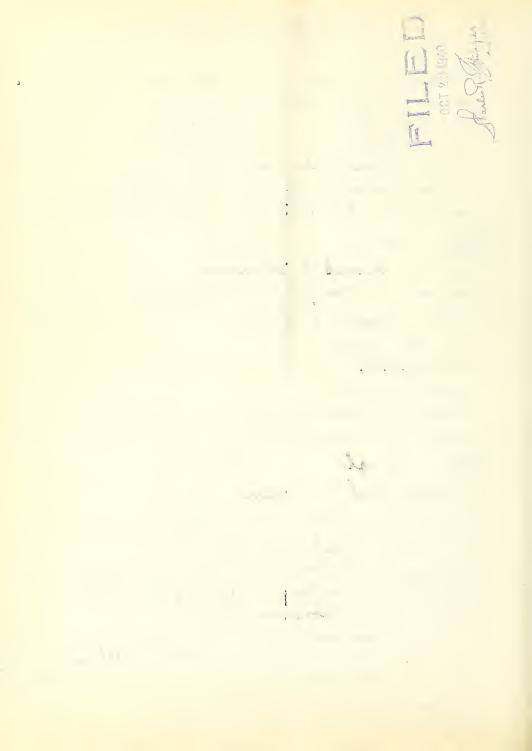


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name His age 30 2) " color... " occupation " Birthplace--City State Order City _ " Residence-Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of Mother. ke sol, elder ance nar Bride's name 2 R Her age ... " color.. " occupation " Birthplace anol State " Residence-Street «City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother..... Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Frank M. Widner and Masie Groom's name Trank N. Widner His age 23 years " color White occupation newspaper Man " Birthplace_City Indian applie State " Residence-Street No. 801 7, Rural City Luch Single 1st, 2nd or 3rd marriage Su Widower Divorced & Wida Name of Father my alin. Cantant Maiden name of Mother... mas Bride's name Her age 23 4 li Li color occupation Clink udianapolia State " Birthplace-" Residence-Street No. 1/66 Pleasant City Indumapolis Ind Single Widow −−−−− ∫ 1st, 2nd or 3rd marriage Divorced Kulu Name of Father Maiden name of Mother... mae may Lul. 28, 1940 Date of this marriage...... Place of this marriage_____ Patricks church In demanolis Name and title of person theme & Me Kong Ali an Performing this marriage.... thut speet 950 62 His address... Indianapol Ludian Roll BU Name M 5140 G. WA land Witness Joseph E. Cantwell, 4109 Jui $_{\mathrm{Address}}\mathcal{M}$



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and eon Groom's name His age " color.... " occupation " Birthplace-State -City City ... " Residence—Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother. as Bride's name . Her age " color... " occupation " Birthplace-State .Ci " Residence-Street No. _City Single Widow 1st, 2nd or 3rd marriage Divorced 0 Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
Harold F. arthur and many Knauer
Groom's name Harveld 7 Arthur
His age <u> </u>
" colorrhite
" occupation Trucking
" Birthplace-City Green Co J State Ind.
" Residence-Street No. 12. 9.3 N. Gall City Induanapalis
Single Widower Divorced State
Name of Father Ben Arthur
Maiden name of Mother Cora V. Oakly
Bride's name Mary Knower
Her age
" colorhite
" occupation
"Birthplace-City_ Putnam Co_ State Indiana
" Residence Street No. 1.2. 0. 3. M. Gale City Indianapolio
Single Widow Dixoreed
Name of Father Jease Knamer
Maiden name of Mother Bertha Phillips
Date of this marriage Detaber 28, 1940
Place of this marriage Trankling Indiana
Name and title of person Performing this marriage John Hurset adams J. P.
His address 750 n. main St.
Witness { Name Janice /Kryaner
Address 1203 7. Latte.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony
William Dixon and Helen Tarrants.
Groom's name
His age 20
" color Brown'.
" occupation House man -
" Birthplace_City Indianapolis State Indiana
" Residence-Street No. 7/9, Lonake & City
Single Widower Divorced Ist, 2nd or 3rd marriage
Name of Father. all Wixow
Maiden name of MotherBeatriesElyflori
Bride's name Helen Tarrants.
Her age 2.6
" color Browney.
" occupation maid
"Birthplace_City_Kanka Rel Ill. State Illinois
" Residence-Street No. darch finny City Kanka ku
Single Widow Divorced } { 1st, 2nd or 3rd marriage } 2 nd
Name of Father any Tarranto
Maiden name of Mother
Date of this marriage Oc - 28. Th
Place of this marriage 123. Moughass Sf-
Name and title of person Performing this marriage Eld, P. Min Field
His address 1118. M. ISelmon Qve -
Indianapolis Ind-
Witness Name Mys Edgar allen Smith. m. C. a. Smith.
Witness { Address 1461, 816 16 16 86, City:



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony en a and mf Groom's name His age " color.. " occupation " Birthplace-City " Residence-Street N Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age ... " color. " occupation " Birthplace-" Residence—Street No. Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother..... Date of this marriage. Place of this marriage... Name and title of person Performing this marriage. His address ... Name Witness Address

3P



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

ILMA Groom's name His age " color. " occupation han 1 " Birthplace-City. " Residence—Street No. Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father... Maiden name of Mother. Bride's name . Her age " color.... " occupation " Birthplace---City. State " Residence-Street No ER. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. a Maiden name of Mother... Date of this marriage.. Place of this marriage... Name and title of person Performing this marriage. His address Name . Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 0 and and Groom's name The than 28 His age .. " color. 44 occupation. 0 " Birthplace--City State 1.4 " Residence-Street No. 10 City Single Widower Divorced 1st, 2nd or 3rd marriage Name of Father Maiden name of Mother 11 Bride's name ... assia 3 Her age .. " color... occupation. 12 4 " Birthplacema State " Residence—Street No. # 34 Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage Place of this marriage., Name and title of person Performing this marriage His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

and Groom's name d His age 66 color. occupation 44 " Birthplace-Ci " Residence--Street Single Widower 1st, 2nd or 3rd marriage Divorced Name of Fath Maiden name of Mother Bride's name Her age color. 66 occupation " Birthplace " Residence Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 0 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. 5 30 Yυ His address Name Witness Address



6 3

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Edwa unall and Groom's name . 1 His age " color... " occupation " Birthplace State " Residence_ -Street N Single 0 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age 66 color... occupation " Birthplace-State Cit " Residence—Street No Single Widow 1st. 2nd or 8rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage... Place of this marriage. Name and title of person a 12 1-Performing this marriage. His address. Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony m 1,9 an Groom's name . m His age " color.... " occupation " Birthplace-CityState " Residence-Street No Single Widower 1 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Bride's name Her age " color... 66 occupation. " Birthplace—City. State " Residence-Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony is and C Homas M. le me r Groom's name His age " color. 1. U. Cer she " occupation " Birthplace-State " Residence—Street No. .City Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father. Maiden name of Mother K Bride's name Her age ... " color. occupation " " Birthplace State " Residence Street City Single Widow 1st. marriage Divorced Name of Father. m Wiro Maiden name of Mother... 16 10 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age a \sim " color. 44 occupation W State " Birthplace 56 " Residence -Street City No Single 1st, 2nd or 3rd Widower marriage Divorced Name of Father Maiden name of M other Bride's name Her age " color. 66 occupation " Birthplace -State City " Residence Single Widow 1st, 2nd or 3rd marriage Divorced C Name of Father Maiden name of Mother F 40 0 0 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address Name Witness Address



442 Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony George Clarkan and ¢ Tela Groom's name Dearge Clarks His age 2 1.U.L. " color..... 0 occupation " Birthplace-City " Residence-Street No. 320 City Single Widower Divorced A A Fit Name of Father all. CALILE Maiden name of Mother BRCe Hightonie Bride's name Her age 1.01 Lc. " color ch " occupation nec " Birthplace State -Street No. 520 N. Men " Residence-Single Widow 1st, 2nd or 3rd 1----marriage Divorced Name of Father. usa. Maiden name of Mother. -0 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage 1108 His address... in Name Witness ddress



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony 1 and lsh over Groom's name His age ... " color.... " occupation an " Birthplace City ana 10. State " Residence--Street No. .. ridia Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother N Bride's name m 2 Her age . Ne " color... 66 occupation M " Birthplace State 3 " Residence-Street No. /// leanCity ndiana Single Widow 1st, 2nd or 3rd marriage Divorced an Name of Fathe rica Maiden name of Mother. 1940 30, cr Date of this marriage. Place of this marriage..... 21.0 Name and title of person Performing this marriage... His address. Name Witness Address



444

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

Marm and Arlin Hucklehry
Groom's name MANN ANN
His age 3 6
" color
occupation
" Birthplace-City Unitomph State Induma
" Residence-Street No. 2 0 Kill Tray City City City
Single Ist, 2nd or 3rd Widower Ist, 2nd or 3rd Divorced Ist, 2nd or 3rd
Name of Father
Maiden name of Mother Noverbow. Justim
Bride's name Arlin Hucklikry
Her age
" color
" occupation
" Birthplace-CityStateState
" Residence-Street No. 12 43 Thepart City Andumaphe
Single Widow Divorced { 1st, 2nd or 3rd marriage }
Name of Father
Maiden name of Mother
Date of this marriage $7730 - 1940$
Place of this marriage Anthon phis Anthon Kergle Reed Name and title of person Performing this marriage Parton of UT and Church
His address R.R. 3 Key 357 Induanaportio
Witness {Name Charles Johnson Monthly M' Donald Address Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Groom's name 21 His age . " color Varo 44 occupation State 44 Birthplace [w ð. " Residence-040 -Street No. Van Citv anandu Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. MY. Bride's name di 21 Her age 66 color_ 66 occupation n 66 Birthplace-State -City ras -Street No. 2040 VI " Residence-City Single 1st. 2nd or 3rd Widow marriage Divorced 1 Name of Father. Maiden name of Mother. K C Date of this marriage. la 6 0 2 0 Place of this marriage. Name and title of person Performing this marriage. His address una Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color....... " occupation " Birthplace-City State " Residence—Street No. Single Widower 0 1st, 2nd or 3rd marriage Divorced Name of Father..... Maiden name of Mother. Bride's name a Her age 46 color..... " occupation State " Birthplace-City u " Residence-Street No Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. Place of this marriage... Name and title of person Performing this marriage His address. Name Witness Address

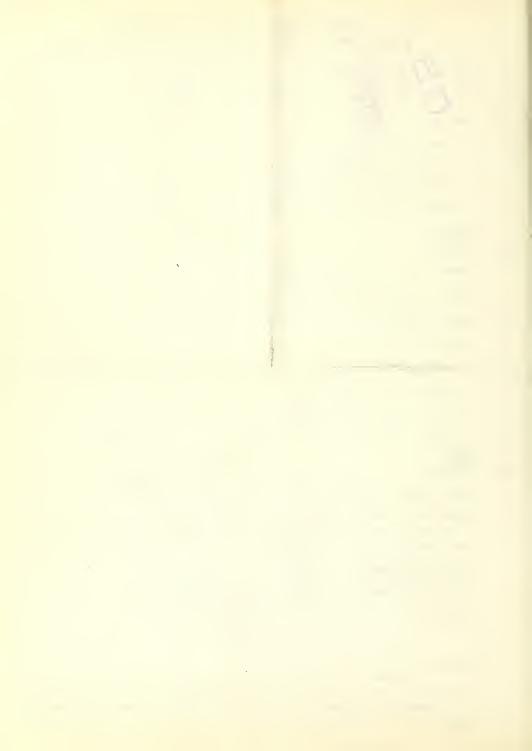


Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age " color..... 44 occupation D " Birthplace-City. State " Residence--Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. a Maiden name of Mother..... Bride's name . Her age ... " color..... 44 occupation... In " Birthplace-City ... State au " Residence—Street No. Low City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. 1111 Place of this marriage... Name and title of person Performing this marriage. ul His address Name Witness 11110 n Address

44.



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony tredy Groom's name His age _ 66 color.... 44 occupation " Birthplace 9 X City " Residence-Street N Single ₩idower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age 44 color.... 64 occupation " Birthplace-City State " Residence-Street No. Citv Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mot Date of this marriage Place of this marriage Name and title of person Performing this marriage. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and 2 Groom's name His age " color. ** occupation. " Birthplace-City tate " Residence-Street No City 20 Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age ... " color.. " " occupation " Birthplace-City " Residence-Street-No City а Single n 4 1st, 2nd or 3rd Widow marriage Divorced Name of Father..... Maiden name of Mother, Date of this marriage... Place of this marriage... Name and title of person Performing this marriage. His address ... Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony Land un Groom's name Þ His age " color. " occupation " Birthplace " Residence-Street No. Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Bride's name Her age " color... " occupation " Birthplace-City State " Residence—Street No Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage ... Place of this marriage... Name and title of person Performing this marriage. His address. Name Witness Address

369



270
Marriage Record for Board of Health
To Be Returned by the Minister or Other Person Performing Ceremony
Faul Junter Mories and Fore the unter Meter
Groom's nameunter
His age
" color/////
" occupation. Machanick
" Birthplace-City
" Residence-Street No. 27 5 Inmilian City Lamerica Cl
Single Widower Divorced Ist, 2nd or 3rd
Name of Fatherdqevdaeu
Maiden name of Mother
Bride's name
Her age? 9
" color
" occupation
" Birthplace-CityState
" Residence-Street No. 3 5 Main al City
Single Ist, 2nd or 3rd Widow Ist, 2nd or 3rd Divorced Ist, 2nd or 3rd
Name of Father Autor at alia filter
Maiden name of Mother. Margaul Seden Security
Date of this marriage Oct. 31, 19.40
Place of this marriage Indian apolis, Jud Name and title of person Performing this marriage Rev. R. L. Mc Cann
His address 234 72 Delaware
Qudianapolis, Ind.
Witness Name Suras Mc. Comm
Witness { Address 234 n. Sel. Indianapolis, Ind.

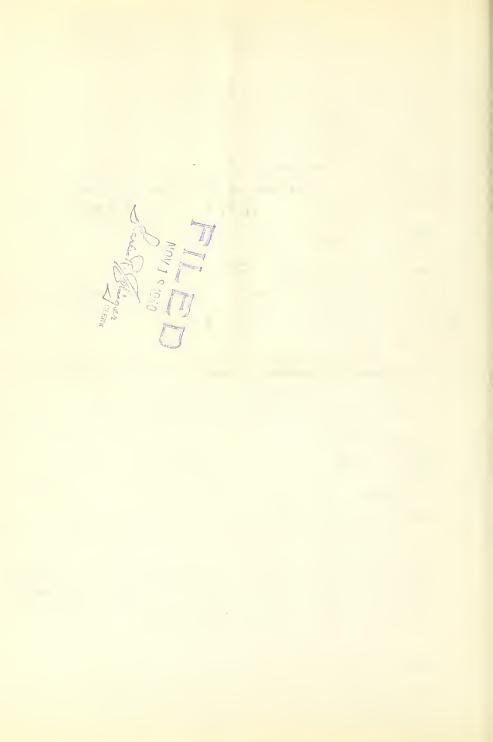
0:01 0 TAL

.

Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony

+/1

and 1. Suis ames Groom's name . His age color M 44 occupation Aarme 66 " Birthplace utnam State " Residence--Street No. 610 CitvSingle Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. mar Bride's name 66 color..... 46 occupation 46 Birthplace Statena 1 " Residence-Street No.City Single Widow 1st, 2nd or SEd marriage Divorced Name of Father -1 Maiden name of Mother Date of this marriage..... Place of this marriage 2.3.4 (M.L Name and title of person Performing this marriage flew form & 0 C unis His address 234 Inducing w ces Dro Name Witness Address



Marriage Record for Board of Health To Be Returned by the Minister or Other Person Performing Ceremony and Groom's name His age ... Mh " color. 66 occupation Birthplace " State " Residence Street No. Citv 5 Single Widower Divorced 1st, 2nd or 3rd marriage 0 ~ Name of Father Maiden name of Mother. ero Bride's name 🗹 x Her age " color.. 66 occupation 66 Birthplace and State 41 10 " Residence-Street No. Single Widow 1st, 2nd 3rd marriage Divorced Name of Father.... Ľ Maiden name of Mother... Date of this marriage..... Place of this marriage ... Name and title of person Performing this marriage. His address 00 ame Witness ddress



77 01353 51.



