

REYNOLDS HISTORICAL GENEALOGY COLLECTION





4092

## MARRIAGE RECORDS

MARION COUNTY, INDIANA PE.4 June 1931

Ministers' Returns

for

the Board of Health

reported to

the Clerk, Circuit Court, Indianapolis, Indiana



Ministers' Returns

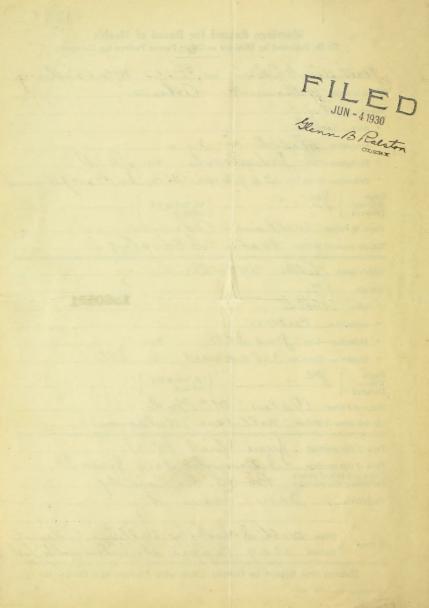
101

the Board of Health

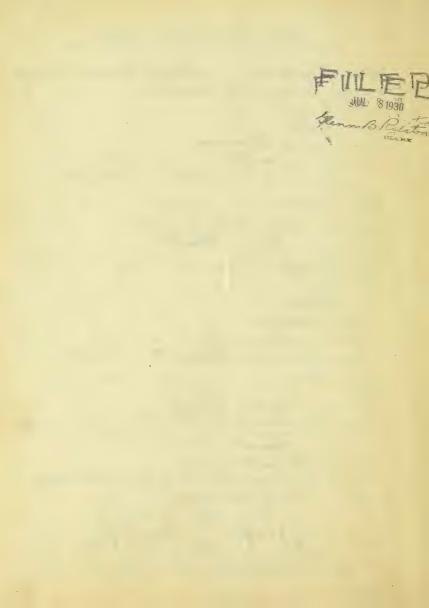
reported to

the Clerk, Ctroutt Court, Indianapolia, Indiana

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Unglian and Groom's name William dand His age 20 color whete " labor occupation. " Leave pr lin State Birthplace 4 A City 1249 " Residence-Street No. yes Single 1st. 2nd or 3rd Widower Divorced marriage Wit Name of Father Maiden name of Mother. 1C/Ba Elie. Bride's name Her age. color White Pter occupation ero d Birthplace-City. State 4 " Residence Street No. 3rd ane west City. Single 1st, 2nd or 3rd Widow marriage Divorced ndo Va Carl Name of Father... Maiden name of Mother Myltma ult reman June first Date of this marriage L 2 canopolis 014 Jones Place of this marriage. Name and title of person Cusars Ter Performing this marriage .... 1 His address hooley as Willia Name. Witness Ha Address.



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony hu 1 andes Frances and Groom's name 1 i Min His age и color... Sureness occupation " 0 " Birthplace 20 State 5.0 Joulhen " Residence Stre City Single Widower 2nd or 3rd 1st Divorced marriage alina Name of Father lan Maiden name of Mother Bride's nan Her age color 10 he 4 asher occupation 4 uisville Birthplace и State nles и Residence-Street Single 1st, 2nd or 3rd marriage Widow Divorced a an Name of Fath arte Maiden name of Date of this marriage. Place of this marriage Name and title of person Performing this marriage Cola His address di Name Witness 10 Address



1230

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                      |
|--|
| Charles Caplinger and gelen Hingery.   |
| Groom's name Charles Caplinger   |
| His age 2/<br>" color White  |
| " occupation Lich Dian   |
| " Birthplace-City Paterville, & State Andiana  |
| " Residence-Street No. 8 48 Bradshart City Indianapalis  |
| Single<br>Widower<br>Divorced Jes, Single Ist, 2nd or 3rd<br>marriage  |
| Name of Father Parts Company Company   |
| Maiden name of Mother  |
| Bride's name gelelen Ijingerg.   |
| Her age 17<br>" color White  |
| " occupation   |
| " Birthplace-City. Manale State Indiana  |
| " Residence Street No 2314 Prosper Stily Indianafal  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>marriage   |
| Name of Father Baber Homes Jungery   |
| Maiden name of Mother Mary Plantagter  |
| Date of this marriage  |
| Place of this marriage And Sapolise Ond<br>Name and title of person<br>Performing this marriage RAME Cann Ordamed Minister |
| His address 234 N Deleware ST  |
| Incharrepolis and  |
| Name Marcus Sedam  |
| Witness Address 948 Elm 149/min and had  |

FILED JUN-3 1930 Blenn B Relaton CLARK

1231

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Underwick C Basetler and Purelyon & filly   |
| Groom's name Shederich Clay Blantbut 1  |
| His age   |
| " colorUlut   |
| " occupation Elucago artist   |
| " Birthplace-City   |
| " Residence-Street No. 1301 (f. Mr. Ak. City Cluca 20 2000  |
| Single<br>Widower J. U.L. d.m. 14 [1st, 2nd or 3rd ] 3.d. []<br>Divorced                              |
| Name of Father A C Barylett   |
| Maiden name of Mother Mary PLERUS   |
| Bride's name Grelyes Formers Both hilly   |
| Her age   |
| " colorUUUUU  |
| " occupation  |
| " Birthplace-City Jude an spales State Lud  |
| " Residence-Street No. 1239 N. Hlowen City Lendillangues.   |
| Single<br>Widow<br>Divorced   |
| Name of Father Ulliam Ealure  |
| Maiden name of Mother   |
| Date of this marriage   |
| Place of this marriage  |
| Name and title of person Part Branch A. D. Dichea   |
| His address 111 2 4 4 1 2 K   |
| 0.14  |
| Witness Runel Orhund<br>Address 1408 D. Mary M.   |
| Return this Report to County Clerk with License and Certificate                                       |



Glenn B Ralston CLERK

- -

1232

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Wilton K. Buchinghour and B. June Stuckwich   |
| Groom's name Millon K. Guicking Low   |
| " color_ while '  |
| " occupation Chain Cedynalin  |
| " Birthplace-City Jine Haute State Sudian   |
| " Residence Street No. 3 3 0 6 Brook side UK City. L. drau afolis                                     |
| Single<br>Widower<br>Divorced Stingle [1st, 2nd or 3rd<br>marriage ]                                  |
| Name of Father Frank M. Buckang Four  |
| Maiden name of Motherabeth  |
| Bride's name B. June Shickwish  |
| Her age 210   |
| " color   |
| " occupation at rome  |
| " Birthplace-City Serve traulle State Steadion  |
| Single ) () () () ()  |
| Widow<br>Divorced   |
| Name of Father Rudseff Suchwish   |
| Maiden name of Mother Role Shaft  |
| Date of this marriage June 1- 1931  |
| Place of this marriage Jerre Hunte Andrown  |
| Name and title of person Bufade W. Fyler - Minister   |
| His address 11 Walden afts, fim Haule And   |
|   |
| Witness Name Mr. Mrs. Henry C. Deuzlen<br>Address 3030 3. 7 % Jam Abute Jung.                         |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Groom's name His age .... 4 color .... occupation 4 Birthplace-" Residence-Street No. Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ... 4 color 4 occupation 4 Birthplace-City State 4 Residence-Street N Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 93 Date of this marriage Place of this marriage Name and title of person Performing this marriage 1700 His address inn Name Witness Address



1234

To Be Returned by Minister or Other Person Performing Ceremony The U and Groom's name. His age. int 4 color occupation. Birthplace " " Residence-Street N Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 44 color. occupation Birthplace-City .State " н 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

FILE DI JUN-3 MAR Blenner B. P. to

1235

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

| Albert & Slighertland Nellie a Rogers  |
|--|
| Groom's name Albert & Alidewell  |
| His age 42   |
| " color. white   |
| " occupation plumen  |
| " Birthplace-City. Lastle State  |
| " Residence-Street No. 18 42 D. City City  |
| Single<br>Widower<br>Divorced J. J. J. Land Construction State Sta |
| Name of Father Spange Children Children  |
| Maiden name of Mother  |
| Bride's name Nellie a Rogens   |
| Her age  |
| " color inflite  |
| " occupation also also   |
| " Birthplace-City minete' State  |
| " Residence-Street No. / 7 42 & received City Description  |
| Single<br>Widow<br>Divorced  |
| Name of Father George W. altris  |
| Maiden name of Mother  |
| Date of this marriage  |
| Place of this marriage 21/2 200 20 20 20 20 20 20 20 20 20 20 20 2   |
| His address. 2. 1. Jenes M. Sudicingels and  |
| Name Lillie Cassidy  |
| Witness Name   |
|  |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony A ellian Roscae Hu alus and Groom's name His age 2 " color nd occupation. Birthplace-City. State " " Residence-Street No CitSingle Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. " color. occupation Birthplace-State 4 - City ч Residence-Street No Single Widow 1st. 2nd or 3rd marri 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

FILED JUN - 8 1930

Elenn B Relston CLARK

1237

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

| and  |
|--|
| Groom's name Edward a. Human   |
| His age  |
| " color  |
| " occupation   |
| " Birthplace-City Adamaptic State Idana  |
| " Residence-Street No. R. 5 B. op 683 City Ind. an afolia  |
| Single   |
| Name of Father Hurry Hermann -   |
| Maiden name of Mother Mary Burkhardt   |
| Bride's name annadean Minc   |
| Her age  |
| " color. White   |
| " occupation House Wife  |
| " Birthplace-City Indianagolis State Indiana   |
| " Residence-Street No City Indangtotis   |
| Single [1st, 2nd or 3rd ]  |
| DIVORCED TI I IIII   |
| Name of Father have been h |
| Maiden name of Mother  |
| Date of this marriage June 120 1931  |
| Place of this marriage Do Rock's Rectory<br>Name and title of person Fr. Price R Philler Q7. 14.   |
| His address lastor 2 & Roch's Parish , R 5 By 604, Indurafat, I  |
| at he alle Enter Van Horn  |
| Witness { Name Patrick J. Alling any Congroundon Address 2712 N. Jel. St. 21 W. 28 sty   |
|  |

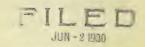


1238

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Dorothy Haynes and Robert Revel   |
| Groom's name Rockert Reeve  |
| His age   |
| " color. White  |
| " occupation Declucal Duranes   |
| " Birthplace-City Harrinan State Jenner   |
| " Residence-Street No. 160 W. Utico H City Indianapolii   |
| Single<br>Widower<br>Divorced } Ist, 2nd or 3rd } Jush  |
| Name of Father Racies   |
| Maiden name of Mother Lula Wight  |
| Bride's name borstly Hay unes   |
| Her age21   |
| " color_ White  |
| " occupation Housekeeper  |
| " Birthplace-City ferranous State Indereca  |
| " Residence-Street No/936 W. Vermont City Indeanapole   |
| Single<br>Widew<br>Divorced   |
| Name of Father Class Rescue. Augues   |
| Maiden name of Mother. Mary forces  |
| Date of this marriage file 1. 1931  |
| Place of this marriage Jude anapolis<br>Name and title of person Revenend J. C. Shandler              |
| His address 242 Chan. Indianapolis  |
| Witness Name I mui Reever for a Dunk  |
| Address 1607 Wialis fle 07 Moohus   |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony MARGA and Groom's name... His age 26 color white " occupation a 4 4 Birthplace-City State 6 " Residence-Street No. 10 City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother 226 Bride's name Her age 2 color 10 4 4 occupation Birthplace-City. State 4 п 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. 0 His address. Name Witness ddress



Elenn B Ralaton

1240

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age. " color 4 occupation State ч Birthplace и Residence--Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mothe Bride's name Her age u color NSO occupation 1CI lane State 4 Birthplace City 36 1 u Residence -Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. 19 Date of this marriage e Place of this marriage. Name and title of person Performing this marriage His address Witness Address

FILED JUN-3 1990 Berne B Parton

1241

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

| and   |
|---|
| Groom's name Tylen J fling  |
| His age 26  |
| " color. White  |
| " occupation Juleris Holded   |
| " Birthplace-City Induceratory State Juding   |
| " Residence-Street No. 33/15 Colly, Un City Julia Arth                                |
| Single<br>Widower<br>Divorced<br>Name of Father Millian B. Harring                    |
| Name of Father.   |
| Maiden name of Mother Ellie Thech   |
| Bride's name May Lyburk   |
| Her age   |
| " color   |
| " occupation Clery  |
| " Birthplace-City_ State State  |
| " Residence-Street No. 418 & /6 - L. City Index spok                                  |
| Single<br>Widow<br>Divorcod   |
| Name of Father Joseff E. Cybrind  |
| Maiden name of Mother May White   |
| Date of this marriage Lucy 1/1931   |
| Place of this marriage 4/6 E. 16 = F.<br>Name and title of person Rev Teurs Arrow Alb |
| His address 11 From Defli   |
| Juden ukola   |
| Name Mrs. May C Lybrund   |
| Witness Address. 418 2 7674   |

FILED JUL 21930 Glenn, B Relatin

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Ruben a Bro 10 and C uben 02 Groom's name ... His age ... 4 color ela occupation. " " Birthplace State Residence--Street No. 4 Single Widower my 1st, 2nd or 3rd Divorced marriage Name of Father mary Maiden name of Mother. 20 Bro Bride's name Her age ... 4 color occupation\_/boure he Birthplace-City State " 2001 Residence-Street No. 44 City Single 1st. 2nd or 3rd Widow man Divorced ill Name of Father. Maiden name of Mother. Jun Date of this marriage... Place of this marriage 36 Name and title of person Performing this marriage 365 His address... Jame Witness ddress

17.42

FILED JUN-3 1930 Glenn B Relation

OLLICK

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony QUON. 00 Groom's name His age 2 " colores telain occupation " hack " Birthplace State u Residence-Street No Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mothe Bride's name Her age .... 4 color,ed. " occupation 4 Birthplace-City State Residence-Street No " City Single Widow 1st, and 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 ley -115 Bl Name Witness Address

FILED

Menn B Relation

1244

| Marriage Record for Board of Health  |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony   |
| I had yetall belak one needpoord & heralt  |
| Groom's name Dloy & Thompson   |
| His age  |
| " color Whith  |
| " occupation Miselin Orphan  |
| " Birthplace-City. LWWW. State. 24 A   |
| " Residence-Street No. DUMAR   |
| Single     Vidower       Divorced     C       Divorced     C   |
| Name of Father Clince, Show With   |
| Maiden name of Mother_AMANY_UUUHen   |
| Bride's name Mabel Gladys Suke   |
| Her age R14  |
| " color. White   |
| " occupation Downstee  |
| " Birthplace-City JudiunafrahisState Jud   |
| " Residence-Street No. 3535 East Walnut "City Judiumphin Jud   |
| Single Single State Stat |
| Divorced Name of Father Survey Survey  |
| Maiden name of Mother Dessa Hull   |
|  |
| Date of this marriage QuMU 1 431   |
| Place of this marriage & Just properties Juck  |
| Name and title of person<br>Performing this marriage John & Maurillo Jt  |
| His address Judfills J. Sulf & J   |
|  |
| Witness { Name   |
| Address  |

FILED JUN - 81930 Glenn B Ralston

TARE

1245

| Marriage Record for Board of Health  |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony                             |
| Ciry L' Saylor and Millie Baree more   |
| Groom's name buy L. Day lor  |
| His age  |
| " color  |
| " occupation I Reference   |
| " Birthplace-City Reg State State  |
| " Residence-Street No. Jacobe City   |
| Single<br>Widower<br>Divorced by 6 [1st, 2nd or 3rd<br>marriage]                           |
| Name of Father Menug Jarler  |
| Maiden name of Mother helles hand and nucces   |
| Bride's name Millies pare more   |
| Her age  |
| " colorUliilo  |
| " occupation & sametcent   |
| " Birthplace-City alighted State State   |
| " Residence Street No.   |
| Single<br>Widow<br>Divorced  |
| Name of Father Augunemous more   |
| Maiden name of Mother new Francisco  |
| Date of this marriage  |
| Place of this marriage Advances Ak<br>Name and title of person<br>Performing this marriage |
| His address damarel d.A.   |
|  |
| Witness { Name Onie K. Manne<br>Address I Internet June J.                                 |
|  |

FILED JUN - 3 1930 Stenn 13 Relation

1246

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                             |
|---|
| To be Returned by Minister or Other Person Performing Ceremony  |
| James. A. Wells and Martha Victorio Hello   |
| Groom's name Laures. a. Welle   |
| His age   |
| " color   |
| " occupation Kailroaden   |
| " Birthplace-City Clisston Co. Route State Mentucky   |
| " Residence-Street No. West Contte . 310 - City. Indianafolis   |
| Shele<br>Whiower<br>Divorced [Ist, 2nd or 3rd 2 ud_   |
| Name of Father Henry Wells  |
| Maiden name of Mother addeline Bell   |
| Bride's name Hartba . Victoria Wells  |
| Her age   |
| " color White   |
| " occupation Housework  |
| " Birthplace-City Cluton Co- State Kentucky   |
| " Residence Street No. 3/104 W. Monthe City fur timesfortis   |
| Single<br>Widow<br>Divorced [Ist, 2nd or 3rd marriage ] Decoud,   |
| Name of Father fame, Dicken   |
| Maiden name of Mother. artilia Kowhoru  |
| Date of this marriage frue 1. 1931  |
| Place of this marriage function apoles - find<br>Name and title of person<br>Performing this marriage Leo. C. Chandler . Revenend |
| His address 2424 N. St. Clair. Indianafold  |
|   |
| Witness Name Bettie H cel Emily May Elected   |
| Address 467 Concord St. 2424 it. In Clair & Fulflos   |
|   |

FILED JUN-3 1930 Glenn 13 Palatan

1247

| Marriage Record for Board of Health                               |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony    |
| Harry albert Weghand and tathlew D. Such                          |
| Groom's name / farrie about Wighard                               |
| His age 50  |
| " color white   |
| " occupation allegances my  |
| " Birthplace-City Mulleherer Job State Judicana                   |
| " Residence-Street No. 4401 C. Westing City Inchanged             |
| Single<br>Widower buckers [1st, 2nd or 3rd<br>Divorced]           |
| Name of Father Fred W. Weg tonst                                  |
| Maiden name of Mother Clesaberty Latte                            |
| Bride's name Authlese N. Swith                                    |
| Her age <u>30</u>   |
| " color while   |
| " occupation / a pero 102/2                                       |
| " Birthplace-City Joe State Julean                                |
| " Residence-Street No. 1904 Alecher City Luclever for             |
| Single<br>Widow<br>Divorced Decresced Ist, 2nd or 3rd<br>marriage |
| Name of Father Will. 6. Sueth                                     |
| Maiden name of Mother Rate Cutte                                  |
| Date of this marriage   |
| Place of this marriage lindiace of als ful                        |
| Name and title of person & fureifce & Jarehur                     |
| His address 37 1 6. Face 6. Pkwy                                  |
|   |
| Name MAD Clarece to Lardung                                       |
| Witness Address 3276. Lall Cer. Hour                              |
|   |



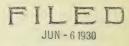
Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 0000 min (ANA) and Groom's name. 2 His age 23 " color AA ella " occupation " Birthplace-City State ON 12 MAN 2 4 Residence-Street No. 50 City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Fathe m 0 DARDA Maiden name of Mother. 1an 1 min Bride's name. Her age... " Coloran 4 occupation Donnol Birthplace-4 - City State NA ц Residence-Street No. 34 north City. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father 1em 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



1249

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

and BIT A Groom's name His age. 0 U TU " color... sulad " occupation ha 66 Birthplace a State " Residence Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother us J. Bride's name Her age. 4 color. occupation 1 " 4 Birthplace State 4 Residence-Street N Single Widow 1st, 2nd or 3rd marriage Divorced 2 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 15 Name Witness anton Address



Glenn B Palston OLLERK

and Groom's name His age " color. 0 " occupation 4 Birthplace State Residence 44 -Street No Single Widow 1st. Bre Divorced marriage Name of Father Maiden name of Mother Bride's name Her age 10 44 color. occupation " а Birthplace и Residence-Street No. 3 8 Single 🗸 1st, 2nd or 3rd marriage Widow 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

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

1250



1251

and Groom's name. His age " color. и occupation и Birthplace State Cit " Residence-Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. color.... 4 occupation Iddes Birthplace-City. 7a а u Residence-Street No. Single 1st, 2nd or 3rd Widow 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 Jame Witness

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



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony In Thomas and Groom's name. His age 5: " color whi u occupation. IPE u Birthplace-City. State Residence-Street N " Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother rhelma Idre. Bride's name Her age. 8:10 4 color RU " occupation u Birthplace - City ..... State и Residence-Street No City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother 931 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address. Name Witness

FILE D Glenn B Ralston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Grlop, In Ir Groom's name His age .... 4 color. mp 4 occupation 4 Birthplace-State ч Residence Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother 3 0. n. Bride's name Her age. 4 color... occupation AD " " Birthplace-City State Residence-Street N manne Gity " 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

FILED JUN-3 1930 Genn 13 Relation OLERR

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and s au Groom's name 2 perl His age 24 " color white lerk occupation ... ente Birthplace-City State " Residence-Street No City Single Widower 1st. 2nd or 3rd Divorcedmarriage Name of Father Maiden name of Mother aug Bride's name whit " color.... occupation Birthplace-City State 22 Residence-Street No Cit. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father, Maiden name of Mother Date of this marriage Place of this marriage... www Name and title of person Performing this marriage 1 AAI His address. Name Witness Address. nau

2.54

FILED JUN-8 1930 Slenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Groom's name His age. " color. 113 4 occupation. cherty u Birthplace-State 4 Residence Street No. Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ..... 1 color. CAL In 4 occupation State. u Birthplace-City.4 4 Residence-Street . City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. 41 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Lorent 11 Name Witness Address

2.55

FILED JUN-3 1930 Glenn B Rolston

CT. R. P

1256

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

and Groom's name nues 5 His age 2.6 color Drows 4 occupation и u Birthplace State а Residence-Street No. Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 2.3 " color. -5 " occupation 4 Birthplace-City State Residence-Street ч Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Date of this marriage Place of this marriage...9 2 Name and title of person Performing this marriage His address Name. Witness Address



JUN - 3 1930 Glenn B Relaton CL-RY

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony alkaud Itan and Charles e la Groom's name 20 His age. " color. hit ч occupation dealest of " Birthplace Stat 5260 " Residence Street No. Single Widower-1st, 2nd or 3rd Divorced marriage 1 л Name of Father austi Maiden name of Mother renen Bride's name Her age. color. occupation 4 44 Birthplace 0 " Residence-Street No Single 1st, 2nd or 3rd Widowmarriage Divorced Name of Fathe Maiden name of Mother Date of this marriage. (11) Place of this marriage Name and title of person Performing this marriage 13 His address en. Witness

Energia Ralaton 0861 8 - NNC FILED

OPPRIME

1258

| To Be Returned by Minister or Other Person Performing Ceremony |
|--|
| Thomas Brauchberg and Ella mac Bayer                           |
| Groom's name Thomas Braublest                                  |
| His age 22   |
| " color white  |
| " occupation Publisher   |
| " Birthplace-City Monistann, State Jean                        |
| " Residence-Street No. Frand Holy City anderson fu             |
| Single Single [1st, 2nd or 3rd ] Frist.                        |
| Name of Father 10 A' 1 Montbell                                |
| Maiden name of Mother Mume Lee Shipp                           |
| Bride's name Ella mac Bayen                                    |
| Her age 22   |
| " color_ White   |
| " occupation   |
| " Birthplace-City (Perry Co- State Suleave                     |
| " Residence Street No. 13 4 W. 2187 City Susanapplies.         |
| Single<br>Widow<br>Diversed<br>Diversed<br>Trist               |
| Name of Father award Bay Er                                    |
| Maiden name of Mother. Mary Plasse                             |
| Date of this marriage func 3rd 1931                            |
| Place of this marriage Andrau speis Sud                        |
| Name and title of person Repportence minialey                  |
| His address 3265 Park are.                                     |
| Judesingslip Jud   |
| Name Haroly 9. Skyhes  |
| Witness Address Shink Auns Stotel.                             |

Marriage Record for Board of Health

FILED JUN-51030 Stenn B Restation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Cletur Clonen mary and Groom's name 25 His age ..... w " color. the occupation " oole 4 Birthplace State 0 Fa fall " Residence-Street N Single In 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother n 10 Bride's name Her age " color. inh 4 occupation State " Birthplace klo ~ City 4 Residence-Street No Single 1st, 2nd or 3rd Widow 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 1 0 a His address. 1 de Name Witness Addres

FILED JUN-3 1930

Glenn B Relation

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

and Edwis mey 600 Groom's name 24 His age. white " color astal occupation. u 100 hea Birthplace-City State " Residence-Street erek " City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 2 Maiden name of Mother. Bride's name rance Her age. a Willer color. 4 each occupation Birthplace State " Cit и Residence--Street N City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 3 Date of this marriage Place of this marriage. H Name and title of person Performing this marriage His address Witness Address Return this Report to County Clerk with License and Certificate

FILED

Glenn B Pelston OLERS

## 12.61

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

| Groom's name  |
|---|
| His age   |
| " color   |
| " occupation Maintenance mon-   |
| " Birthplace-CityIndianapolis   |
| " Residence-Street No. 906 It n. York St City Judionofoolin   |
| Single       Widower       Divorced       1st, 2nd or 3rd       marriage  |
| Name of FatherJohn Feltz  |
| Maiden name of MotherAnna Sauer   |
| Bride's nameAnna_Marie_Ziegler  |
| Her age   |
| " color   |
| " occupation Comptometer Operator   |
| " Birthplace-CityNoblesvilleStateIndiana  |
| " Residence-Street No. 802 h. Oxford City Meelinofool   |
| Single     Single     1st, 2nd or 3rd       Divorced  |
| Name of Father  |
| Maiden name of MotherCathering Brachway   |
| Date of this marriageJune 3, 1931   |
| Place of this marriage Cicero, Indiana<br>Name and title of person<br>Performing this marriage (Rev.) F.X.Miller, Pastor, Sacred Heart Church |
| His address 319 E.South St. Lebanon, Ind. ( Cicero  |
| Witness Name Jos. R. Pollz 906 W. N. Jork St.<br>Address Rouris Zwyler  |
| Return this Report to County Clerk with License and Certificate   |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 10 Groom's name RG de His age. " color. NO 4 occupation (1x) Birthplace State 4 5 " Residence-Street No City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother Bride's name 1960 Her age " color " occupation 44 Birthplace-Citve State Residence-Street No a110 20 " City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. N ne Date of this marriage The Place of this marriage. Name and title of person 5 Performing this marriage zn and His address Helen du ray Name Witness m Address ana

FILED JUN-61930 Menn B Ralston

1263

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |                               |  |
|---|-------------------------------|--|
| Bang of Mathe To pro B  | and Bita Marie Mantyre        |  |
| Groom's name of any U.  | Malt                          |  |
| His age 32  |                               |  |
| " color white   |                               |  |
| " occupation Barber   |                               |  |
| " Birthplace-CityFrance   | cStateL                       |  |
| " Residence-Street No. 963  | Hington City Indpla           |  |
| Single<br>Widower<br>Divorced   | list, 2nd or 3rd.<br>marriage |  |
| Name of Father Il illean  | n Malt                        |  |
| Maiden name of Mother   | U alphin                      |  |
| Bride's name Cita M   | an M- Intyre                  |  |
| Her age 23  | V                             |  |
| " color white   | M                             |  |
| " occupation gesting  | Musse Milia                   |  |
| " Birthplace-City And   | an 1                          |  |
| " Residence—Street No. /004 C.  | Mahuf City Sudfla             |  |
| Single<br>Widow<br>Divorced   | 1st, 2nd or 3rd   //          |  |
| Name of Father  | un The Sature                 |  |
| Maiden name of Mother   | Kutchingen                    |  |
|   | Let & thet                    |  |
| Date of this marriage.  | price 3 - 143                 |  |
| Place of this marriage Der Museum at<br>Name and title of person<br>Performing this marriage          | Dre Dud                       |  |
| His address In Anna falis   | and X I                       |  |
|   |                               |  |
| Witness { Name  |                               |  |
|   |                               |  |

FILED JUN - 8 1930

Glenn B Poloton

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony lias usmussen u. and Groom's name mu His age. 4 color. m ALA occupation 44 U 4 Birthplace-City State " Residence-Street No City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age 4 color. eler " occupation u Birthplace-City State Residence-Street No u TAI City Single 1st, 2nd or 3rd Widow 1 marriage Divorced U Name of Father Maiden name of Mother 3 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 2 753 His address Name Witness Address

12.64

FILED JUN-91930 Glenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony NAI and Groom's name His age 45 " color. occupation QLANN " Birthplace-City Wushardle u State. Residence-Street No. 54 De 101 " City. Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 30 " color W occupation NM " 4 Birthplace-- City State Residence-Street No ... " rarn. Single Widow 1st, 2nd or 3rd marriage Divorced MARINA Name of Father 111 march Maiden name of Mothe Place of this marriage. Name and title of person Performing this marriage. NN His address Name Witness Addres

FILED JUN - 8 1930 Glenn B Rolston OL- BX

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Mic NON allon 12 turas Groom's name His age а color. 0 " occupation dean 4 Birthplace State 2 155 1. aural " Residence-Street No. City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Mildree ac 1z Bride's name Her age 4 color. " occupation inm u Birthplace State kirllo " Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced ac Name of Father Maiden name of Mother. 1931 Date of this marriage irtady Place of this marriage. Name and title of person nev. Lyour Performing this marriage. His address Name Witness Rd. Address.



Glenn B Relston CLERK

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Helen Leuleer Hallie troubridge Groom's name Mailie Trovbridge His age 22 color white 44 occupation factory worker Birthplace-City Tichney State Residence-Street No. 20 L. Bradley Single sugo Widower 1st. 2nd or 3rd Divorced marriage Name of Father Dunid Harland Trovbuda Marie 12. Maiden name of Mother Bride's name Selen Leulen Her age 18 color white occupation service clinical Birthplace-City Indianapolis State Residence Street No. 20 J. anady inapolis. Single 1st, 2nd or 3rd single Widow marriage Divorcert Name of Father , lega Maiden name of Mother Jessie Little June 3 - 1481 Date of this marriage ..... udianapolis Ind. Place of this marriage. Name and title of person Emil G. Boch. Performing this marriage His address 1039 Spruce It. Indianapolis Ind verett Stanchurner & Trancis Stargburn Witness 745 Olive H. Indianapolis

FILED JUN - 81930 Glenn B Relaton

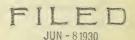
| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                                    |  |
|--|--|
|  |  |
| a. P. Volz and Margaret & Lond   |  |
| Groom's name alfred P. Voly  |  |
| His age 22   |  |
| " color. White   |  |
| " occupation Route foreman   |  |
| " Birthplace-City Morris State Indrawa   |  |
| " Residence-Street No. 1624 Sprace Se- City Indianopolo  |  |
| Single<br>Widower Ist, 2nd or 3rd Turst  |  |
| Divorced   marriage  |  |
| Name of Father Micholas Volz   |  |
| Maiden name of Mother Barbara Mersenbach   |  |
| Bride's name Margaret E. Ford  |  |
| Her age 2-1  |  |
| " color White  |  |
| " occupation Book - binder   |  |
| " Birthplace-City, Indianapolis State Indiana  |  |
| " Residence Street No. 1624 Shuce SI - City Indianapolis   |  |
| Single Ist, 2nd of Sted First  |  |
| Diverced   |  |
| Name of Father. Harry dord   |  |
| Maiden name of Mother Mary Buckley   |  |
| Date of this marriage June 3 - 1931  |  |
| Place of this marriage Holy angals thuch   |  |
| Name and title of person $\mathcal{P}$ $\mathcal{F}$ $\mathcal{T}$ $\mathcal{H}$ $\mathcal{L}$ $\mathcal{L}$ $\mathcal{F}$ $\mathcal{T}$ |  |
| Performing this marriage fren, Q, F, Metter un Iarran<br>His address VS 26 Northwestern av   |  |
| 1115 duti cos  |  |
| win alos Vala  |  |
| Witness Name that Long Oudrama   |  |
|  |  |

12.68

FILED

| To Be Returned by Minister or Other Person Performing Ceremony       |
|--|
| mand a pattagh one lebrod apput militand                             |
| Groom's name Inwithin Arapha bookell                                 |
| His age RS   |
| " color Whith  |
| " occupation Marshant  |
| " Birthplace-City Indumulique State Sul                              |
| " Residence-Street No. Marmarille City Suy                           |
| Single<br>Widower<br>Divorced  |
| Name of Father Shurles Jon dell                                      |
| Maiden name of Mother Muthy & Europis                                |
| Bride's name Matthew & Drug,   |
| Her age 29   |
| " color ullut  |
| " occupation work  |
| " Birthplace-City Martuppill State Sug                               |
| " Residence-Street No. 3742 not Centry Judusululu                    |
| Single [1st, 2nd or 3rd]   |
| Divenced)  |
| Name of Father Drawning Manus In any                                 |
| Maiden name of Mother January JAVAM                                  |
| Date of this marriage Junel 14 the 1931                              |
| Place of this marriage Disdung of roles Jud                          |
| Name and title of person<br>Performing this marriage for the Mauring |
| His address Sundwurthelis Sund &                                     |
|  |
| Name   |
| Witness Address  |
|  |

1269



JUN - 8 1930 Glenn B Relston CLERE

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony leon asb and. Groom's name His age Drike (1) color. occupation nahol col. Birthplace State Residence-Street No. 1601 Widower 1st. 2nd or 3rd Divorced marriage Name of Fath Maiden name of Mother Bride's name Her age. 1.) color.... occupation Birthplace - City. State 0. Residence-Street No. G 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

Return this Report to County Clerk with License and Certificate

Address

4

4

"

4 4

"

Single

Widow

Single



1271

| To Be Returned by Minister or Other Person Performing Ceremony  |  |  |
|---|--|--|
| 1 2 ria a Hendrickerry, Martha & Sundan "   |  |  |
| Groom's name alarid a readicit som  |  |  |
| His age 2 8   |  |  |
| " color. In fute  |  |  |
| " occupation de la contraction de la contractio |  |  |
| " Birthplace-City Line Lenne State Lennes   |  |  |
| " Residence—Street NoCity   |  |  |
| Single<br>Widower<br>Divorced Yesy (1st, 2nd or 3rd<br>marriage ,   |  |  |
| Name of Father france of the concentration  |  |  |
| Maiden name of Mother_Lycellbeck  |  |  |
| Bride's name Martha & Lawson  |  |  |
| Her age / J   |  |  |
| " color_whate   |  |  |
| " occupation House respectives  |  |  |
| " Birthplace-City   |  |  |
| " Residence-Street No. Marcia It City Judianapolio  |  |  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>marriage  |  |  |
| Name of Father Service W. Sawfor  |  |  |
| Maiden name of Mother. C. M. Sle. Starl   |  |  |
| Date of this marriage   |  |  |
| Place of this marriage Andrewice South  |  |  |
| His address 2 0 14 Jones St. Judiangpolit out   |  |  |
|   |  |  |
| Witness Name Moble Fruston  |  |  |
| Address 1225 Salansin Sta   |  |  |



JUNI 0 1930 Glenn B Relation

1272

| and  |
|--|
| Groom's nameA. Marrio  |
| His age  |
| " color  |
| " occupation Desil h Arcaleuper  |
| " Birthplace-City Indianatics State Ind  |
| " Residence-Street No. Riley Hospital City Indiangeli  |
| Single<br>Widower<br>Divorced  |
| Name of Father. Longh E. Comb  |
| Maiden name of Mother Leading Marc   |
| Bride's name Killy M. Marco  |
| Her age  |
| " color  |
| " occupation   |
| " Birthplace-City Handeburg State Ind  |
| " Residence Street No. Riley Harile City Indianget   |
| Single<br>Widow<br>Divorced  |
| Name of Father Jama  |
| Maiden name of Mother  |
| Date of this marriage  |
| Place of this marriage   |
| Performing this marriage. Concerned and the second se |
| His address 312 M. Cally Induced the   |
| m1 +. p  |
| Witness { Name   |
| Address  |

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

FILED JUN - 5 1930 Sterm B Parton

1273

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |
|---|--|--|
| Eulow M. McDey and eous P. Montgomery   |  |  |
| Groom's name Eulow ft. Mc Vey   |  |  |
| His age 21  |  |  |
| " color_ thite  |  |  |
| " occupation Judican Refining Co.   |  |  |
| " Birthplace-City. Judgels . State. Jul.  |  |  |
| " Residence-Street No. 2944 Dewey City Hidflo.  |  |  |
| Single<br>Widower<br>Divorced Divorced Ist, 2nd or 3rd First  |  |  |
| Name of Father  |  |  |
| Maiden name of Mother Mystle Eulow  |  |  |
| Bride's name Leona F. Montgomery<br>Her age 21  |  |  |
| " color Phite   |  |  |
| " occupation  |  |  |
| " Birthplace-City Scotlabury State Rid.   |  |  |
| " Residence-Street No. 70.6 Burnick City Hidflo .   |  |  |
| Single Scieff [1st, 2nd or 3rd marriage]  |  |  |
| Name of Father M. Moulgomery  |  |  |
| Maiden name of Mother. Grace Dudgewater   |  |  |
| Date of this marriage June 4  |  |  |
| Place of this marriage 409 Effect Jock St, Oly<br>Name and tille of person Heu - Bhalke               |  |  |
| His address 3/3/1. Grant and -  |  |  |
| Witness Name Lyle Summers<br>Address 4009 E. New York St  |  |  |
|   |  |  |



1274

| To Be Returned by Minister or Other Person Performing Ceremony        |
|---|
| Michael Frances M' Reversion Malitale Jane Vermillion                 |
| Groom's name / Michael Francis Mickever                               |
| His age 62  |
| " color/hite  |
| " occupation Ison worker  |
| " Birthplace-City Coaceanll State Ledina                              |
| " Residence-Street No. 1306 & Reymond City Undere and                 |
| Single-<br>Widower Mideurer Ist, 2nd or 3rd Mideur                    |
| Name of Father Nomao MC Runcz   |
| Maiden name of Mother Oacherin Planson                                |
| Bride's name Mullda Jaco Vermillion                                   |
| Her age   |
| " colorC  |
| " occupation dille preser   |
| " Birthplace-City 1011 Wall State State Such and                      |
| " Residence-Street No. 727 Juanenen City Summanico                    |
| Single<br>Widow<br>Divorced     Madau     1st, 2mb or 3rd<br>marriage |
| Name of Father Malley's Le & piert                                    |
| Maiden name of Mother O Muste na Schnedlo                             |
| Date of this marriage fine 4th 1931                                   |
| Place of this marriage Indrone folic, I.d.                            |
| Name and title of person Rev. Geo. J. Schostian                       |
| His address 950 Prospect IV.  |
| Andianafolia, And   |
| Name John Brauder   |
| Witness Address 3765 N Illingio IL                                    |
|   |

FILED JUN-61930 Slenn B Ralston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age. le " color iround Q 11 Mar " occupation 4 Birthplace ð State " Residence-Street No. Cit Single Re Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age. to 11 1 " color occupation 4 State " Birthplace " Residence-Street Cit Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. 3 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Addre Return this Report to County Clerk with License and Certificate

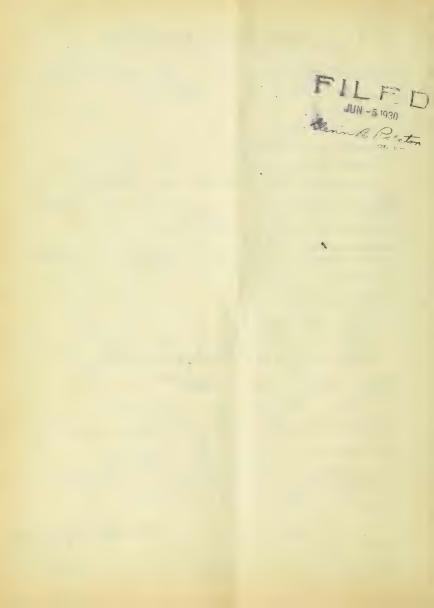
FILED

1276 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Arters and old Groom's name 2 His age. TI 44 color. Fashin Kute 4 occupation what 4 Birthplace-City State. 1.3 aware " Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorcod marriage Name of Father Maiden name of Mother .... Cota 1 10000 40 Bride's name Her age. " color henser 4 occupation 0 " Birthplace-State -City 44 Residence-Street No. 36 City Single Widow-1st, 2nd or marriage Divorced Name of Father 11 Maiden name of Mother. 1 TU Date of this marriage udianops e. Place of this marriage. Name and title of person Performing this marriage stio 11 13 His address.. Name Witness 6 Address Return this Report to County Clerk with License and Certificate

FILE D JUN - 5 1930 Slinn B Rosa to OT Fo

1277

| To Be Returned by Minister or Other Person Performing Ceremony  |
|---|
| Educt Station and Margart C. Same   |
| Groom's name. There is a stand of the stand |
| His age   |
| " color   |
| " occupation  |
| " Birthplace-CityStateState   |
| " Residence-Street No. 96K. n. Undubon City morph   |
| Single Minced Ist, 2nd or 3rd marriage  |
| Name of Father  |
| Maiden name of Mother   |
| Bride's name  |
| Her age   |
| " color   |
| " occupation  |
| " Birthplace-CityState  |
| " Residence-Street No. 645 I Mendian & City Indply  |
| Single Widow Ist, 2nd or 3rd merriage   |
| Name of Father  |
| Maiden name of Mother   |
| Date of this marriage   |
| 15 A.J. Bentin  |
| Place of this marriage  |
| His address 126 H. Argalet  |
| 2125 Male 1. H  |
| Witness Name / Valley typell<br>Address e / 200 5454 & /0854  |
|   |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Carrol line ino oran .....and.. 10000 Groom's name 101 His age ... 2 color. " In ina occupation. 4 DAA. 4 Birthplace State -City. " Residence in City No. V Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 4 color occupation Birthplace 4 State и 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 addr Name Witness Address

FILED JUN-5 1930

JUN - 5 1930 Elenn B Palston CLAREK

1279

To Be Returned by Minister or Other Person Performing Ceremony neurs and Groom's name. His age 2 (0 Ko. color 4 and occupation ... J Butternel Birthplace-City. " State 439 8 " Residence-Street No. Cit Single Widower 1st, 2nd or 3rd Divorced marriage 39.11 Name of Father. Maiden name of Mother man 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 Witness



1280

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

Heren and Groom's name enny His age 2 color " occupation. ALS 4 Birthplace-City State Residence-Street No. " 16 City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father enne Maiden name of Mother 215 0 Bride's name Her age. " color. occupation 4 Birthplace-City 5 Residence-Street No. 4 X 1.69 City Single 1st, 2nd or 3rd Widow 110 marriage Divoreed Name of Father Maiden name of Mother. Date of this marriage 1210 Place of this marriage Name and title of person Performing this marriage His address WRITEN Name Witness 9/03 - 3

FILED JUNI 11930 Menn B Prestor.

12:31

|               |         |        | or Board of<br>Other Person P |      | eremony |
|---------------|---------|--------|-------------------------------|------|---------|
|               |         |        | Daise                         |      | thoma   |
| name Ceren    | I L.    | Dave   | 8                             |      |         |
| r. Wh         |         |        |                               |      |         |
| npation       |         | -      | State                         | el.a | /       |
| idence—Street | No. 4/2 | w. Ray | City.                         | dud  | ili'.   |

1st, and on

marriage

State

dre

1st, 2nd or 3rd marriage

Return this Report to County Clerk with License and Certificate

Name

Address

Groom's His age " colo 4 occi " Bir

Single Widower

-Divorced

Name of Father. Maiden name of Mother.

Bride's name

color.....

occupation

Birthplace-

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

Her age.

4

4

"

Single

Divorced Name of Fathe Maiden name of Mother Date of this marriage.

His address

Witness

" Residence-Street No. 4/2 W. Ray

9100

se was

u d

2.1

41 lin

City

Residence-Street No



Glenn B Ralston

1282

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| ura Embrey and Pully Hale   |
| Groom's name Una Enliney  |
| His age 2.1   |
| " color white   |
| " occupation forming  |
| " Birthplace-City grade to m co/ State 14.  |
| " Residence-Street No. Color City City  |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>marriage  |
| Name of Father J. J. Carlos y   |
| Maiden name of Mother V Hanora Combridge  |
| Bride's name Ruly Hale  |
| Her age   |
| " color   |
| " occupation Hause Work   |
| " Birthplace-CityCharles in CuState   |
| " Residence Street No. Para and City.   |
| Single Widow Divorced Ist, 2nd or 3rd marriage  |
| Name of Father 6, J. Hard   |
| Maiden name of Mother   |
| Date of this marriage Dune 5th 1931   |
| Place of this marriage melian Sholis Ind  |
| Name and title of person RANG Carm Ordanned Minister  |
| His address 234 N. Deleware st  |
| (Name Sade Manapolio gnd.   |
| Witness Address 204 10- 10 Contraction  |
| Return this Report to County Clerk with License and Certificate                                       |

FILED JUN-91930 Genn. 13 Rolaton CULER

1283

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

and Groom's name His age ..... " color. 09 occupation State. " Birthplace -City Ma, " Residence Street Single An 1st, 2nd or 3rd Widower Divorced marriage Harkin Name of Father Maiden name of Mother Bride's name Her age. color... 4 occupation. lon State " Birthplace-City.  $\parallel$ 4 Residence-Street No. 10 M 20 Single Widow W 1st, 2nd or 3rd 11 marriage Divorced nca 11 Name of Father 7.7. Mal Maiden name of Mother ino Date of this marriage. Place of this marriage .... 2910 Will Name and title of person Rw Performing this marriage His address. naell Name. Witness Address 2010 Meer 12



1284

| To Be Returned by Minister or Other Person Performing Ceremony   |     |
|--|-----|
| Anthur & Jones and Goodia Wilson   | >   |
| Groom's name Arthur & Jones  |     |
| His age  |     |
| " color  |     |
| " occupation Delivery Missenger  |     |
| " Birthplace-City Agel State Sections  |     |
| " Residence-Street No. 306 Auldry City Dellaupper  | 2   |
| Single<br>Widower<br>Divorced State Control State Stat |     |
| Name of Father Carly Jones   |     |
| Maiden name of Mother Nell Amaad   |     |
| Bride's name Cordia Milaon   |     |
| Her age  |     |
| " colorW lite  |     |
| " occupation / denter Oderator   |     |
| " Birthplace-City Durchs Co State Sydenick   | 1 . |
| " Residence-Street No. / 306 Chilly City Lie Marshall  | 10  |
| Single<br>Widow-<br>Diverced   |     |
| Name of Father Thanks Milson   |     |
| Maiden name of Mother Emelin Fear  |     |
|  |     |
| Date of this marriage from 5 5 1.791   |     |
| Place of this marriage Inclusion of the A.<br>Name and title of person<br>Performing this marriage Rep. Gev. J. Subscription   |     |
| His address 950 Prospect It  |     |
| Indianafolio I.d.  |     |
| Name Bom Hace Melson   |     |
| Witness Address 50 & & Raymond   |     |



|  | 1285                                |
|--|-------------------------------------|
|  | or Board of Health                  |
| To Be Returned by Minister or O                      | Other Person Performing Ceremony    |
| Paul Kromen and                                      | martha Kephart                      |
| Groom's name Paul Tra                                | mer                                 |
| His age 24   |                                     |
| " color White  |                                     |
| " occupation Rubber my                               | oulder                              |
| " Birthplace-City Jour Cou                           | nty State Infloring                 |
| " Residence-Street No.2. 32.5 Lor. In                |                                     |
| Single<br>Widower<br>Divorced                        | st, 2 <del>nd or 3rd</del> J. First |
| Name of Father Joseph Ru                             | amer                                |
| Maiden name of Mother. Ca tha                        | lotte surpatrick                    |
| Bride's name marths The                              | phart                               |
| Her age  | ·                                   |
| " color white  |                                     |
| " occupation Gressing a dr                           | y eleaning                          |
| " Birthplace-Citymanion Con                          | inty State maining                  |
| " Residence-Street No./ 444 Gratt                    | My City Midianapolis                |
| Single<br>Widow<br>Divorced                          | st, <del>and or ard</del> ] Fist    |
| Name of Father Thanks M                              | ephant                              |
| Maiden name of Mother Denen                          | - Bailey                            |
| Date of this marriage functor                        | 1931                                |
| Place of this marriage main                          | applie holiang                      |
| Name and title of person<br>Performing this marriage | hilmen that                         |
| His address minister 2nd                             | Bystyterian Church                  |
| andian aboli   | a tradeauxa.                        |

Name Witness

Return this Report to County Clerk with License and Certificate

Address J.

FILED Glenn B Ralston CLERK

1286

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

W.F and Groom's name J His age .... color 4 occupation ru aust ч Birthplace и Residence ...City Single Widowe or 3rd 1st, 2nd Divorced marriage Name of Father. Maiden name of Bride's name Her age. color occupation Birthplace " State 00 " Residence -Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother 111 Date of this marriage Place of this marriage, Name and title of person Performing this marriage His address Witness

FILED JUN-61930 Slenn B Palatan

1287

| To Be Returned by Minister or Other Person Performing Ceremony                    |
|---|
| Otto A. H. Roschack and Florence & Barmer   |
| Groom's name_ atto R. H. Roschwick  |
| His age   |
| " color   |
| " occupation Bus Driver   |
| " Birthplace-City bulianapoliz State Indiana                                      |
| " Residence-Street No. 2157 Rolland City Indianapolis, Red.                       |
| Single     Widower       Divorced     Ist, 2nd or 3rd                             |
| Name of Father Milliam H. Roschack  |
| Maiden name of Mother Marie Lienhopp  |
| Bride's name Florence a. Banner   |
| Her age 28  |
| " color. White  |
| " occupation Housekeepen  |
| " Birthplace-City Indianapolis State Indiana                                      |
| " Residence-Street No. R. R. H. Box 6/3 City Indiana polis, had.                  |
| Single<br>Widow<br>Divorced   |
| Name of Father William & Baumer   |
| Maiden name of Mother   |
| Date of this marriagefunce51931   |
| Place of this marriage protion polis, Indiana                                     |
| Name and title of person<br>Performing this marriage 12. M. Baumer, A.D. Minister |
| His address 1046 Lynnhurst Que  |
| Louisville, Kap.  |
| Name arthurf Baumer Dora W. Rosebrock   |
| Witness Address 17-4. B. J. Sandismaferling R. R. H. Box 612 Jandpils             |

FILED Glenn B Ralston

1288

| Marriage Record for Board of Health                              |  |
|--|--|
| 7 To Be Returned by Minister or Other Person Performing Ceremony |  |
| toses Cliffe Weisenberger and agrica Spring There                |  |
| Groom's name. Lascal Cliffle Cleasenberger                       |  |
| His age 25   |  |
| " color. Ultite A  |  |
| " occupation auto Mechanic                                       |  |
| " Birthplace-City Met Carmel State Selinois                      |  |
| " Residence-Street No. 130 20 the 20 the City Suchanapolis Sug   |  |
| Single<br>Widower<br>Divorced Augle Ist, 2nd or 3rd<br>marriage  |  |
| Name of Father Teank Weisenberger                                |  |
| Maiden name of Mother Ella May Lill                              |  |
| Bride's name Luna Louise Dowe                                    |  |
| Her age  |  |
| " color White  |  |
| " occupation Dourse wife   |  |
| " Birthplace-City Uncernet State Inting                          |  |
| " Residence Street No. 412 N. alleband City Sudiana polis And.   |  |
| Single<br>Widow<br>Divorced Augle [1st, 2nd or 3rd<br>marriage   |  |
| Name of Father Rece neth f. House                                |  |
| Maiden name of Mother Anna Louise How                            |  |
| Date of this marriage June 5th 1931                              |  |
| Place of this marriage Audiana Solis Sudiana                     |  |
| Name and title of person<br>Performing this marriage             |  |
| His address 2254 Central aller                                   |  |
| Judique polis fuctiona   |  |
| Name T. S. W. Evenberger   |  |
| Witness Address  |  |



JUN - 9 1930 Glemm B. Polston

1289

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Faul Ball and A 1 RIN Beames Ban a Groom's name. 23 His age 10 " color 100 occupation B ax Birthplace-City State 68 wo Residence-Street No 141 City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother. ine A nau Bride's name 04 Her age ... wh 4 color. 1 222 occupation Birthplace-City State 5 Residence-Street No. 141 City Single 1st, 2nd or 3rd Widow marriage Divorced 24 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 as Name lo Witness Address -

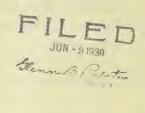
Mennels Relation LILED

1290

| To Be Returned by Minister or Other Person Performing Ceremony        |
|---|
| ian Hanna Back Fand Pressing Street in                                |
| Groom's name Himself  |
| His age /   |
| " color   |
| " occupation Salaman -  |
| " Birthplace-City Tem Hant State Inderen                              |
| " Residence-Street No. 2  |
| Single<br>Widower<br>Divorced     Ist, 2nd or 3rd<br>marriage         |
| Name of Father Burg S   |
| Maiden name of Mother Mary Burgart -                                  |
| Bride's name Marinin Emma Erision                                     |
| Her age 2.2   |
| " color   |
| " occupation ON home  |
| " Birthplace-City_ Maduson State Juncana.                             |
| " Residence-Street No. 45 M. Jaleh Bitford Incompeter                 |
| Single<br>Widow<br>Divorced     Ist, 2nd or 3rd<br>marriage     127 - |
| Name of Father Jeny, L. atthesson                                     |
| Maiden name of Mother Linna C. Sweeback                               |
| Date of this marriage funce le 7/2 1931                               |
| Place of this marriage Church of the down.                            |
| Name and title of person<br>Performing this marriage                  |
| His address 5315 n. Decure 15.  |
| - which - of going I -  |
| Name C. L. Phillips   |
| Witness Address 1466 finwood live                                     |

FILED JUN-81930 Glenn B Releton CLEREX

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Achae and 0 An Groom's name ... His age ... " color... occupation Birthplace-City State " " Residence-Street No. 1 City Single Widower UY 1st, 2nd or 3rd Divorced marriage ara Name of Father slok Maiden name of Mother 10. Bride's name Her age. color. 000 occupation State Birthplace-City " " Residence-Street No. Single Widow 1st, 2nd or 3rd NC marriage Divorced Name of Father 1.CI 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



1272

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

19. and Groom's name. 10 Min His age 23 Jal hito. color neurance agent. occupation State " Birthplace-City een o. 145 " Residence-Street No. montity Single 1st, 2nd or 3rd Widower marriage -Divorced Name of Father Maiden name of Mother. Bride's name Her age ... 4 color en occupation Birthplace State Inta City и Residence-Street No Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother CIDI .9 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

FILED JUN-91930 Glenn B Roeston CLUBER

1293

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony          |  |
|--|--|
| willet boug sizes manunhand sime millile   |  |
| Groom's name William Quis Doshman  |  |
| His age 440  |  |
| " color. is that   |  |
| " occupation Janitar   |  |
| " Birthplace-City. & Katture State Stel  |  |
| " Residence-Street No. 6/0 Shelly City Inopla  |  |
| Single     2     {st. 2nd or 3rd       Widower   |  |
| Name of Father find for aniel for ashman   |  |
| Maiden name of Mother G lla lawq   |  |
| Bride's name Jasie Pearl Sfelly  |  |
| Her age  |  |
| " color white  |  |
| " occupation househeper  |  |
| " Birthplace-City New Burnswird State Led  |  |
| " Residence-Street No. 6/0 Shelly City Inaple  |  |
| Single<br>Widow<br>Divorced  |  |
| Name of Father James William Joguy   |  |
| Maiden name of Mother Mary I rance Med aughlent  |  |
| Date of this marriage  |  |
| Place of this marriage Indulu apolo Ind<br>Name and title of person<br>Performing this marriage Jan & Manuny J |  |
| His address Ludumingune OMA  |  |
| Witness Address 6/9 Shilly   |  |
| Butum this Benerit to County Clark with Lisense and Cartificate  |  |

FILED JUN-81930 Glenn B Parton

1294

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |
|---|--|
| Norman P. Comtois and Frances Pauline Stringan.   |  |
| Groom's name Morman P. ComToris   |  |
| His age 25  |  |
| " color Mut   |  |
| " occupation MURMUNITEN   |  |
| " Birthplace-City Williman Tic State Comm   |  |
| " Residence-Street No. 1040 N. D. Sawart S City Miaraponi   |  |
| Single<br>Widower<br>Divorced Jaurid A Computer Ist, 2nd or 3rd                                       |  |
| Name of Father AWIA P. Imitois  |  |
| Maiden name of Mother 2113RDETR (STUPTON) COMPTUS   |  |
| Bride's name France Multine Manigun   |  |
| Her age   |  |
| " color While   |  |
| " occupation CHAR   |  |
| " Birthplace-City_AIMUSM_State_MUInha   |  |
| " Residence-Street No. 725 N. I MMAY/UlnukCity NIMason 1  |  |
| Single<br>Widow<br>Divorced   |  |
| Name of Father, NMM, JTMM yum   |  |
| Maiden name of Mother Lath Jung May DOCK  |  |
| Date of this marriage Alpe 6. 1931  |  |
| Place of this marriage Christ Chiwch, Maiananoths   |  |
| Name and title of person Jon M. M. Francis, History.  |  |
| His address 1537 Pentral Avenue,  |  |
| Indianapotis.   |  |
| Name When Way und Horno vinders   |  |
| Witness Address JII 2.22. Manna 4239 Tridewith 14   |  |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Why and D Groom's name His age 3 3 " color whit occupation ..... and Birthplace-City ... State 4 Residence-Street No " City Single-Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name a Her age 2 color whit occupation ..... Birthplace-City. State Residence-Street No. 0 much п City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother Date of this marriage 10 arts Place of this marriage. Name and title of person 0 Performing this marriage His address.. Name Witness Address

FILED JUN-81930

1296

| To Be Returned by Minister or Other Person Performing Ceremony              |
|---|
| Paul E. Dolly and Viola herry Cari  |
| Groom's name Paul E. Dolby  |
| His age 2.3   |
| " color. Johite   |
| " occupation Baker  |
| " Birthplace City Indianopolis State Indiana                                |
| " Residence-Street No. 12 X h. East City Lidple                             |
| Single<br>Widower<br>Divorced } [1st, 2nd or 3rd<br>marriage                |
| Name of Father James Dolly  |
| Maiden name of Mother Frina a Statt   |
| Bride's name Viola may Cain   |
| Her age 2 2   |
| " color White   |
| " occupation sterrographer  |
| " Birthplace-City Indiangolis State Kindiang                                |
| " Residence-Street No. 233 h. manificity Justes                             |
| Single<br>Widow<br>Divorced Jurge [1st, 2nd or 3rd<br>marriage ]            |
| Name of Father Frank M. Cam   |
| Maiden name of Mother hang IV - Lander                                      |
| Date of this marriage June 6, 1931  |
| Place of this marriage 233 W. morris st.                                    |
| Name and title of person<br>Performing this marriage Rev. Seo. S. Austranch |
| His address 203 S. 17th 2X., Richmond, Suite                                |
|   |
| Name Brugt Je Mac   |
| Witness Address 1.24 It- and M.   |



1297

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

Orvilla ville ( Groom's name... a His age " color. occupation " " Birthplace City State " Residence-Street No. Single Widower 4 11 1st. 2nd or 3rd Divorced marriage Name of Father 10 Maiden name of Mother Bride's name Her age. u color. he occupation .State " Birthplace 4 Residence Single Widow Au 1st, 2nd or 3rd 10 marriage Divorced Name of Father Maiden name of Mother. ul 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

FILED JUN-91930 Slenn /3 Restor

1278

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

11. and Groom's name His age. " color.. occupation и Birthplace--City State " Opensu. City Residence-4 -Street No. Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother 0 Bride's name Her age ... 4 color. occupation 4 Birthplace pr State City 4 Residence-Street No In In - Cit 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.



1779 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony mo Groom's name His age color. occupation Birthplace-City State. " Residence-Street N City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name. Her age color. occupation Birthplace-City State no Residence-Street No. City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Fathe Man Maiden name of Mother ... 9 3 0 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness 3.3 8 Address

а

и "

4

4

а

и



1300

| Marriage Record for Board of Health   |  |  |  |  |
|---|--|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony  |  |  |  |  |
| Jelus to prulent one Signed & years   |  |  |  |  |
| Groom's hame & ay C. Harres   |  |  |  |  |
| His age 28  |  |  |  |  |
| " color exhite  |  |  |  |  |
| " occupation Labor  |  |  |  |  |
| " Birthplace-City Danville State Inf  |  |  |  |  |
| " Residence-Street No. 114 N. Anapuis City Super  |  |  |  |  |
| Single<br>Widower<br>Divorced<br>St, 2nd or 8zd<br>marriage   |  |  |  |  |
| Name of Father. James & farris  |  |  |  |  |
| Maiden name of Mother Aella Pobling   |  |  |  |  |
|   |  |  |  |  |
| Bride's name L'helma a Cubel  |  |  |  |  |
| Her age 19  |  |  |  |  |
| " color_white   |  |  |  |  |
| " occupation le lech  |  |  |  |  |
| " Birthplace-CityState_State_S   |  |  |  |  |
| " Residence-Street No. 4 5 5- M. M. alustoity In Aple   |  |  |  |  |
| Single // Ist, 2nd or 3rd marriage  |  |  |  |  |
| Name of Father Harry N. Cubel   |  |  |  |  |
| Maiden name of Mother Margaret Me Laughlen  |  |  |  |  |
| Date of this marriage   |  |  |  |  |
| Place of this marriage Der dungaho for Sult   |  |  |  |  |
| Name and title of person which is Manuary   |  |  |  |  |
| His address In Armanallis Sul &   |  |  |  |  |
|   |  |  |  |  |
| Name lal Schmit   |  |  |  |  |
| Witness Address 105 M. Minhow Outpe   |  |  |  |  |
| the second |  |  |  |  |

FILE D

Glenn B Ralston

1301

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |  |  |
|---|--|--|--|--|
| Care 7. Haussecken Turina mochle  |  |  |  |  |
| Groom's name Carl +. Haussecker   |  |  |  |  |
| His age 2-8   |  |  |  |  |
| " color   |  |  |  |  |
| " occupation aspenter   |  |  |  |  |
| " Birthplace-CityState germany  |  |  |  |  |
| " Residence Street No. 951S. alabamacity Red' fes, Red.   |  |  |  |  |
| Single<br><u>Withwar</u><br>Divorced<br>Name of Father.   |  |  |  |  |
| Maiden name of Mother marie Ott   |  |  |  |  |
|   |  |  |  |  |
| Bride's name Mina Mochle  |  |  |  |  |
| Her age 2.1   |  |  |  |  |
| " colorWhite  |  |  |  |  |
| " occupation  |  |  |  |  |
| " Birthplace-CityState  |  |  |  |  |
| " Residence-Street No 3755 Wash Bergity Sud pes, and  |  |  |  |  |
| Single<br>Widom<br>Divorced<br>LARO<br>Ist, 2nd or 3rd-<br>marriage<br>                               |  |  |  |  |
| Name of Father.   |  |  |  |  |
| Maiden name of Mother Withelmine highle   |  |  |  |  |
| Date of this marriage June 6, 1931  |  |  |  |  |
| Place of this marriage<br>Name and title of person<br>Performing this marriage<br>Ren , 7, R. Waries  |  |  |  |  |
| His address 3610 guilfad  |  |  |  |  |
| Carl Zeally a hunder  |  |  |  |  |
| Witness Name and Jegur anna Mal Schoor<br>Address & 3 Sanders & 21 Sanders                            |  |  |  |  |



1302

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                        |  |  |  |  |
|--|--|--|--|--|
| M PH J. MALAR  |  |  |  |  |
| a a tia  |  |  |  |  |
| Groom's name Classence Australia Men Now C   |  |  |  |  |
| His age 2.9  |  |  |  |  |
| " color It hely  |  |  |  |  |
| " occupation . Lalennae  |  |  |  |  |
| " Birthplace-City. Chemican State Andrean  |  |  |  |  |
| " Residence-Street No. 2102 / Mesider City Sud Ils.  |  |  |  |  |
| Single<br>Widower<br>Divorced  |  |  |  |  |
| Name of Father Albert Agan Jour  |  |  |  |  |
| Maiden name of Mother Leatheracte  |  |  |  |  |
| fin the Dea the there of   |  |  |  |  |
| Bride's name town flageda fritter  |  |  |  |  |
| Her age 2.7  |  |  |  |  |
| " color Il hale  |  |  |  |  |
| " occupation decretely   |  |  |  |  |
| " Birthplace-City Achara State State   |  |  |  |  |
| " Residence-Street No. 7/11 M. All City City   |  |  |  |  |
| Single<br>Widow<br>Divorced  |  |  |  |  |
| Name of Father Kouce Vulhrou   |  |  |  |  |
| Maiden name of Mother Lyda 7 Mayan   |  |  |  |  |
| Date of this marriage  |  |  |  |  |
| Place of this marriage Indiana fello Gendramen<br>Name and title of person Performing this marriage Pere Franker Been, In A. |  |  |  |  |
| His address 2025-21. Levelle Cere  |  |  |  |  |
| Videanapoles Sudeana   |  |  |  |  |
| Witness Address 2/64 n Lalport 3209. E. Wash   |  |  |  |  |
| - Indiana to - Ind   |  |  |  |  |

FILED JUN 1 0 1930 Glenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age 0 " color u occupation Birthplace-City State 4 Ni " Residence-Street No. City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father. Maiden name of Mother éli e Bride's name 8 Her age. 4 color 4 occupation 4 Birthplace State Residence 4 -Street No: City Single 1st, 2nd or 3rd U 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 1 1 Thus Name Witness Address 4 NAA

17.02

FILED JUN - 8 1930 Slenn B Relation

1304

|    |    | Marria     | ge   | Recor    | d  | for <b>E</b> | loard  | of  | Health           |  |
|----|----|------------|------|----------|----|--------------|--------|-----|------------------|--|
| То | Be | Returned b | by N | Minister | or | Other        | Person | Per | forming Ceremony |  |

and Eufica Groom's name His age ... color N " na Gee kunst occupation. u Birthplace-City... State 4 ea Wilew ц Residence-Street No. .Citv Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father any Maiden name Mother appett ua Bride's name Her age. ils 4 color an occupation 4 " Birthplace-City ZAN nau A State " Residence-Street No. 1.2 City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father 15 ant. Maiden name of Mother. vra us Date of this marriage. Place of this marriage Name and title of person Performing this marriage His address. a ott Name Witness

FILED JUN 1 5 1930 Genn B Ralston

1305

To Be Returned by Minister or Other Person Performing Ceremony LE and Groom's name His age ... sto 4 color. occupation 10 State " Birthplace-City " Residence-Street No City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name. som Her age. 22 color.... 6 occupation / Hou LState Birthplace-City. 4 и Residence-Street No. 4 1 City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father wa 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



1366

| To Be Returned by Minister or Other Person Performing Ceremony   |  |  |  |  |
|--|--|--|--|--|
| Brin W. Koop, and pora Bligdette Thegor  |  |  |  |  |
| Groom's name burn w Karp   |  |  |  |  |
| His age  |  |  |  |  |
| " color. Mohelk  |  |  |  |  |
| " occupation faborer   |  |  |  |  |
| " Birthplace-CityCOLLENCE State  |  |  |  |  |
| " Residence-Street No. S. C. A. Enceded City Jun Cue   |  |  |  |  |
| Single<br>Widower<br>Divorced Jungle [1st, 2nd or 3rd ] Hinst  |  |  |  |  |
| Name of Father That The  |  |  |  |  |
| Maiden name of Mother Allow Alexander  |  |  |  |  |
| Bride's name from the provent  |  |  |  |  |
| Her age BCAR   |  |  |  |  |
| " colorhile  |  |  |  |  |
| " occupation Hgull August  |  |  |  |  |
| " Birthplace-CityStateState  |  |  |  |  |
| " Residence-Street No. 3930 Alam City Indiandrey   |  |  |  |  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>marriage   |  |  |  |  |
| Name of Father Shife house   |  |  |  |  |
| Maiden name of Mother  |  |  |  |  |
| Date of this marriage  |  |  |  |  |
| Place of this marriage 6930 Apama five Indenegations<br>Name and title of person K. Amipe B. Burnister |  |  |  |  |
| His address duction of and   |  |  |  |  |
| R. R. 15- BOX 100  |  |  |  |  |
| Name Opal Simpson Willie Hole time   |  |  |  |  |
| Witness Address 39.40 Spann and 3937 2 pannane.  |  |  |  |  |

FILED JUN - 9 1930 Genn B. Ralaton CLARK

To Be Returned by Minister or Other Person Performing Ceremony and Tibo Groom's name 50 His age ... " color " occupation. " Birthplace-City. State " Residence-Street No. City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age ..... " color.... 11 . " " occupation " Birthplace-City. State 4 Residence-Street No. 6 / .....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

1307

FILED JUN - 9 1930 Glenn B Relaton CLEERK

30% Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Plant Lockersed and ; asis Groom's name. His age 21 color Wit occupation Birthplace State " Residence-Street No. 42 e City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age color 2 occupation -- m-Birthplace--City Residence-Street No. 2001 L. City Single Widow 1st, 2nd or 3rd marriage 1 1 1 Divorced Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage

NO

LEVEY PRINTING CO., INDIPLS. 27868 52-80

Name

Address

His address

Witness

.04

34 Ur

а

ч

"

4

4

4

и



1309

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

| William Hamilton Mayer and Martha  | Lou Cline             |
|--|-----------------------|
| Groom's name William Hamilton Mayer  |                       |
| His age  |                       |
| " colorWhite   |                       |
| " occupation Furniture Business  |                       |
| " Birthplace-City Indianapolis, St   | ate. Indiana          |
| " Residence-Street No. 5614 Lowell Ave. Ci   | ty Indianapolis, Ind. |
| Single<br>Widower<br>Divorced 1st, 2nd or 3r<br>marriage   | d }Second             |
| Name of Father David Mayer   |                       |
| Maiden name of Mother Clara Hamilton   |                       |
| Bride's name Martha Lou Cline  |                       |
| Her age  |                       |
| " color White  |                       |
| " occupation Clerk   |                       |
| "Birthplace-City_Indianapolis, St  |                       |
| " Residence Street No. 1916 College Ci   |                       |
| Single<br>Widow Single [ 1st, 2nd or 3r<br>Divorced ]  |                       |
| Name of Father Charles E. Cline  |                       |
| Maiden name of Mother Clara J. Todd  |                       |
| Date of this marriage June 6, 1931   |                       |
| Place of this marriage <u>Chicago</u> , <u>Illinois</u><br>Name and title of person<br>Performing this marriage <u>J</u> , <u>Allen</u> Leas, D.D. Ho: |                       |
| His address 3731 Clifton Avenue, Chica   | ago, Ill.             |
|  |                       |
| Name Maurice N. Ray  | mall. Then            |
| Witness Address 3726 N. Meridian St., Ind.   |                       |



Genn B Relston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Met calf - and Hoffman Harold B. metcal Groom's name ... His age 2 color Alstante " occupation. romest Birthplace-City Andra and State " Residence-Street No. 1929 7. Pom, City Single Widower Single 1st, 2nd or 3rd marriage Has Divorced altura. halas Name of Father Maiden name of Mother Ston Leonor tis Cathering Susan Bride's name. man Her age 28 color Marte occupation leach Birthplace-City.... Hanny Count State а n. Pum City C 15 " Residence-Street No. Single Widow 1st, 2nd or 3rd Fred An marriage Divorced 100 Name of Father. Maiden name of Mother. tawcall in 6 hand Date of this marriage adveres daug Place of this marriage Name and title of person Performing this marriage 12.9 His address Name Witness W Address. Japen

FILED JUN-81930 Glenn B Redeston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Hard and Groom's name.  $\Gamma$ His age ... " color. 0 G ч occupation inde State и Birthplace-City MA VV 1627 norra " Residence-Street No. City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father L VIACe Maiden name of Mother. Co Bride's name Her age " color 4 occupation State " Birthplace-City ah ١, 21 ...City. и Residence-Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Fathe Maiden name of Mother. 9 Date of this marriage Place of this marriage. Name and title of person A Performing this marriage His address 100 Name Witness Address

FILED JUN - 8 1930 Glenn B Relation

1312 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony NAMAN and n11 Groom's name His age 2 " color white occupation ..... alau State Birthplace-City. " Residence-Street No ... City Single 1st. 2nd or 3rd Widower Divorced marriag Name of Father Maiden name of Mother May Daly Bride's name Her age color when IN 111 occupation Birthplace-City State Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced les 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

4

ч

4

" ĸ

FILED JUN-81930 Slenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony MAN and aure James Edward 1 lift Groom's name.... His age 25 color. White ц occupation Rate Clerk 4 Birthplace City Columbury molinun 4 State N Residence-Street No. 3319 East bermon 4 .City. mainunkotes Single Sinal Widower 1st, 2nd or 3rd Divorced marriage Name of Father. inthe the haub Maiden name of Mother. lier aura. Cour Bride's name.\_ Her age ..... color White 4 erstar occupation..... " Birthplace-City. State Nour nn. udio napolio и Residence-Street No. Mark City rx non Single 1st, 2nd or 3rd Widow lina marriage Divorced Name of Father. na too ann Maiden name of Mother 9.31 Date of this marriage ..... Place of this marriage. Name and title of person Performing this marriage. His address Name Witness us Address



Glenn B. Rolston MRS

| 1314  |
|---|
| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
| attes Anderica Nolte and Marquarite & Keilhole  |
| Groom's name Walter Hisderick North   |
| His age 27  |
| " color   |
| " occupation Baker  |
| " Birthplace-City Indianaportis State Indiana.  |
| " Residence-Street No. 3614 Magazine C. City Little Ky  |
| Single<br>Widower<br>Diversed   |
| Name of Father Maliann, H. Norte,   |
| Maiden name of Mother Comelia Kirker  |
| Bride's name Marquerite & Keilhold  |
| Her age 25  |
| " color_White   |
| " occupation Steriographics   |
| " Birthplace-City Indiana State Indiana.  |
| " Residence-Street No. R. R. NO. 8, 80070B. City Indianaporis,  |
| Single<br>Widem<br>Divorced   |
| Name of Father Nell 197   |
| Maiden name of Mother Mary Zalla  |
| Date of this marriage June 6, 1931.   |
| Place of this marriage And Marker And                             |
| His address 1135 Fletener Quenue;   |
| Indianapolis. Indiana   |
| Name Raymond & Trefy  |
| Witness Address P. P. & Pry 48 Sudianapolis   |

\_

\_

.....

Return this Report to County Clerk with License and Certificate

Wal Groo His a " " 4 Sing Dim Nan Mai \_\_\_\_

> Brid Her 4 и а " Sing Wie Div Nan Mai

FILED JUN-91930 Senn B Relation

1315

| Marriage Record for Board of Health  |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony               |
| Herlen any Burger Beatrice Marine Bowman                                     |
| Groom's name   |
| His age  |
| " colorWhite   |
| " occupation Welder  |
| " Birthplace-City Kokomo, State Art  |
| " Residence Street No. 2239 1 Vallot City Judeana polis                      |
| Single<br>Widower<br>Divorced Juicfle Ist, 2nd or 3rd July<br>Inarriage July |
| Name of Father D. H. New Com   |
| Maiden name of Mother Ella K. Dullinger                                      |
| Bride's name Bedrice Noome Bowman  |
| Her age 22   |
| " color Whyte A  |
| " occupation Alguo Graphic )   |
| " Birthplace-City Baruard State Arch   |
| " Residence-Street No. 2154 All, City Julph Lit                              |
| Single<br>Widow<br>Divorced Juight [1st, 2nd or 3rd<br>marriage ] / M        |
| Name of Father ACMEN & Dew Mare  |
| Maiden name of Mother Halle E Waltoce  |
| Date of this marriage forme 6, 1931  |
| Place of this marriage but the place point for the process Minuster          |
| His address Judiana polis Judian   |
| En Ecut O  |
| Witness Name alias to and the second   |
| Address 1739 Wall Place Screphe Vice   |
| Between this Benert to County Clark with License and Contifecto              |

FILED JUN-9 1930 Slenn B Paleston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony acolo 2.and m Groom's name His age. CA " color 4 occupation hugin State Birthplace-City 4 " Residence-Street No. -8 2 City Single Widower 1st. 2nd or Divorged marriage Name of Father Maiden name of Mother in en Bride's name Her age. w Z color " occupation ugo State и Birthplace--Citv Residence—Street No uro .City ч 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 ddross



To Be Returned by Minister or Other Person Performing Ceremony Josefle he. and Bernisco Pullige Roberts Groom's name .... 10 His age 54 " color which occupation Man Jachures Birthplace-City Brownsto 4 State. " Residence-Street No Bround Single Wed Widower 1st, 2nd or 3rd Divorced marriage Ro le. Name of Father. Maiden name of Mother P. DDia Bride's name Remice (Protter Her age 3.3 color white 4 occupation Clice orgrapher Brownstoren Birthplace-City State " No. 2541 Shelby 21 Residence-Street City ч Single Widow 1st, 2nd or 3rd marriage Widow Divorced lun atter Name of Father ark Maiden name of Mother he Date of this marriage A NU dio Place of this marriage Name and title of person Performing this marriage Waque His address. an Witness

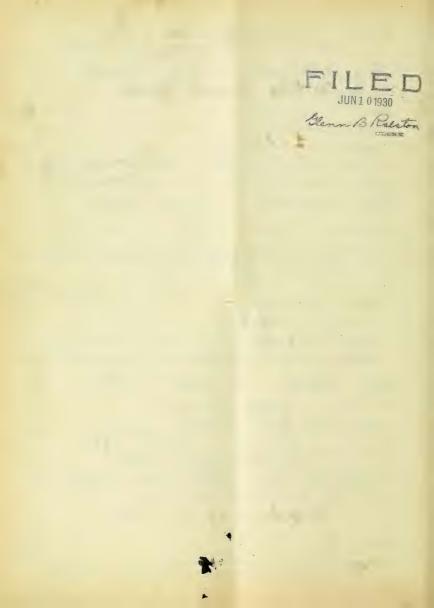
Marriage Record for Board of Health

131

FILED

JUN-81930 Glenn B Redston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Frank TODALO PATAMAG and Fran Smi Is Groom's name. 23 His age Col " color..... occupation Birthplace-City State Residence-Street No. 10 29 0 u Yaha City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father mes Maiden name of Mother 2000 don essel. Inson 12 .15 Bride's name 22 Her age ... colorest " color.... air moccupation H othrings " Birthplace-City. State City Inde 23 Martindale anapolis In Residence-Street No. 2-1 4 Single 1st, 2nd or 3rd Widow marriage Divorced 10 Name of Father. 6 ٤ Maiden name of Mother .... Na INO Date of this marriage. Place of this marriage. Name and title of person G Performing this marriage His address. a Name Witness Address



1319

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |   |
|---|---|
| Will pickard mith and yeary & anderson  |   |
| Groom's name Joseph Ribard Smith  |   |
| His age 2-3   |   |
| " color White   |   |
| " occupation Camposing Haleman"   |   |
| " Birthplace-City. Aning hild State Helmont   | 1 |
| " Residence-Street No. 239 2 Aning City Indian apolis   |   |
| Single<br>Widower<br>Divorced 2 Lawring [1st 2nd or 3rd ] 3 chl                                       |   |
| Name of Father James R. Angeth  |   |
| Maiden name of Mother Mary hand '   |   |
| Bride's name Mary E. Moleson.   | _ |
| Her age 2-2   |   |
| " color_ Winte  |   |
| " occupation Homecoverie  |   |
| " Birthplace-City 200 cennes State Inchance.  |   |
| " Residence-Street No, 2.7211 Mable City Indianafolis   |   |
| Single<br>Widow<br>Divorced   |   |
| Name of Father William Proting and ling le com  |   |
| Maiden name of Mother Mary & Manna  |   |
| Date of this marriage. Anne 6 193   |   |
| Place of this marriage lant fine technolog  |   |
| Name and title of person<br>Performing this marriage Rev. Lim a. Trikf                                |   |
| His address 2.3. M. Magurane I dan apolio   | ` |
|   |   |
| Man Mass. Marie churth  |   |
| Witness Name Magne, Magne, Mutho  |   |
| ( 41443 COU   |   |

LEVEY PRINTING CO., INDIPLS. 27868 52-80

FILED JUN - 9 1930

Glenn B Ralston

| 1220  |
|---|
| Manniago Pasand for Pasand of Hacki   |
| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
| 00  |
| End B. Show and Mary Beatries Just.   |
| Groom's name. Fred B. Shaw  |
| His age 27 YEars,   |
| " colorWhite  |
| " occupation Manager  |
| " Birthplace-City. Montganny Co State Jud.  |
| " Residence-Street No. Lowerock Red. City Indianappli   |
| Single )  |
| Widower Angla 1st, and or 3rd Mark  |
| Name of Father Q. L. Hugui  |
| Maiden name of Mother Plant Whalin  |
|   |
| Bride's name Mary Beatric's Hurt  |
| Her age   |
| " color White   |
| " occupation Home Eirl,   |
| " Birthplace-City Andrean applies State Juck,   |
| " Residence-Street No. R. R. H. 17 Bax 109 B. City Andran 20 et                                       |
|   |
| Single<br>Widow Juight Ist, 2nd or 3rd<br>marriage  |
| Name of Father Buy towning B. Hurt  |
| Maiden name of Mother ala B. Meavilly   |
|   |
| Date of this marriage   |
| Place of this marriage  |
| Name and title of person<br>Performing this marriage  |
| His address 5614 Brrachway  |
|   |
| (Name Mrs. O. L. Ahaw   |

Return this Report to County Clerk with License and Certificate

Address Mrs. B. B. Kurt

Witness



Glenn B Rala to

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony inc kins aucan, and Groom's name His age ... .to 4 color occupation 20 " Birthplace State 4 Residence Street Single 1st, 2nd or 3rd Widowe Discorred marriage - ,l Name of Father Maiden name of Mother Bride's name 6 Her age + arte 4 color occupation State " Birthplace 10 " 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 wa His address ac Name Witness ddres



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Albert + rieda and Sulla Groom's name. His age. " color. Aman 4 occupation oradon Birthplace-City. " State " Residence-Street No. City Single Rt 0 Widowe 1st. 2nd or 3rd-Divorced-K. Name of Father Maiden name of Mother Bride's name Her age hilo " color " occupation ran p. in Birthplace State -4 & Carly City. " Residence Street Single -8PA 1st. 2nd or 3rd Widow marriage Divorced Name of Father alle Maiden name of Mother. und all. Date of this marriage ndeana Place of this marriage . Name and title of person Performing this marriage TIda 12 His address Witness arvara ddress

FILED JUN-81930 Glenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Vilure and Groom's name 1 His age ... a color .... occupation 4 State 4 Birthplace-City 4 Ŏ Residence-Street No. City " Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 4 color 4 occupation " Birthplace-City State Residence-Street No. 6 " 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

FILED JUN - 9 1930

Elenn B Ralston CLERK

1374

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age du 4 color Ecrator rang а occupation State Birthplace " " Residence-Street No City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Fath 6 a Maiden name of Mother Bride's name Her age u color sh 1 × he occupation polo " Birthplace State Eastern 110 " Residence-Street No. Single 1st, 2nd or 3rd 2 Widow marriage Divorced 5 m N 1 Name of Father aut 6 Maiden name of Mother C 6th -1931 Date of this marriage Place of this marriage Name and title of person 11 0 Performing this marriage P a das 1 His address William egeln Name Witness suda W/3 Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Ineuce and Groom's name His age .... " color 4 occupation Birthplace-City 4 State " Residence-Street No City Single Widower 4 1st, 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother Bride's name Her age. " color occupation 4 " Birthplace State Residence-Street No Cit " Single Widow 1st, 2nd or 3rd marriage Divorced L Name of Father Maiden name of Mother. 9 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address lor Name Witness Indian 715 Address



Glenn is Ralston

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

|  | and                                       |
|--|---|
| Groom's name. Frank Fleser   |   |
| His age 22 Years.  |   |
| " color  |   |
| " occupation Labor.  |   |
| " Birthplace-City_Hibing-  | State Minnisota                           |
| " Residence-Street No. 11 N. Blackf  | ord City Indianapolis, Ind.               |
| Single<br>Widower<br>Divorced<br>Name of Father  | LST<br>Ist, 2nd or 3rd<br>marriage        |
|  |   |
| Maiden name of Mother. Maria Fleser  | •   |
| Bride's name Marie Oltean.   |   |
| Herage 18 Years.   |   |
| " color. White   |   |
| " occupation Labor,  |   |
| " Birthplace-CityIndianapolis,   | State Indiana                             |
| " Residence-Street No. 525 W. Pearl  |   |
| Single<br>Widow<br>Divorced  | { lst,<br>{ lst, 2nd or 3rd<br>marriage } |
| Name of Father_John Ultean   |   |
| Maiden name of Mother Floarea Oltes  | an.                                       |
| Date of this marriage June 7 , 1931  |   |
| Place of this marriage. Koumanina Orth<br>Name and title of person Rev Glicerie<br>Performing this marriage. |   |
| His address 204 N. Blackford St  | creet                                     |
| indianapolis, ind.   |   |
|  | and Emilia Rogozia                        |
| Witness Address 3.5 N. Mount   | Street indianapolis, ind.                 |

FILED JUN 1 5 1930 Glenn B Relation

1327

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
|  |
| and the second s |
| Groom's name_fnillon_2   |
| His age  |
| " colorWheele  |
| " occupation marchaeren and  |
| " Birthplace-City Livity Lily State marging  |
| " Residence-Street No. 1964 10 Coma City Indianafilia  |
| Single<br>Widower<br>Divorced Jungle [1st, 2nd or 3rd ]  |
| Name of Father Ange Harry  |
| Maiden name of Mother_Caa_Uright   |
| Bride's name alta marie Ware   |
| Her age 2 1  |
| " colorWhete   |
| " occupation Inspection - Real Sulp  |
| " Birthplace-City Degrandle State , marana   |
| " Residence-Street No. / 101 Central City manapolin  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>Divorced List, 2nd or 3rd  |
| Name of Father Wards   |
| Maiden name of Mother  |
| Date of this marriage  |
| Place of this marriage<br>Name and title of person<br>Performing this marriage   |
| His address  |
| genel Stance   |
| Witness Name. Address Address Address anafalia"  |
|  |

FILED JUNI 11930 Generation

Marriage Record for Board of Health To Be Returned by Minister or Other-Person Performing Ceremony Has and Groom's name His age ... 4 color.... rule occupation State " Birthplace-City Residence-Street No " Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Mo U Maiden name of Mother Bride's name Her age " color occupation To 4 Birthplace-City. State 4 led Residence-Street No. " 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.



1329

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |
|---|--|--|
| Evan Laughlin and Figures Emminger.   |  |  |
| Groom's name Ovan I Laughlin  |  |  |
| His age 26 years  |  |  |
| " color. Let hite   |  |  |
| " occupation Drug blesk   |  |  |
| " Birthplace-City Burnes City State Indiana   |  |  |
| " Residence-Street No. 2614 Central Gue City Indianapolis   |  |  |
| Single<br>Widower<br>Diverged [1st, Snd or Srd] First   |  |  |
| Name of Father Isman Los Faughlin   |  |  |
| Maiden name of Mother Susan Certha It lynn,   |  |  |
| Bride's name Transit Comming 10   |  |  |
| Her age: 22 day. Old.   |  |  |
| - color   |  |  |
| " occupation Seleptone april  |  |  |
| " Birthplace-City Marcon State Sudiana  |  |  |
| " Residence-Street No. / P. 4. Nepler McCity Sudianapules   |  |  |
| Single<br>Widew<br>Discoreed  |  |  |
| Name of Father Unite Commander  |  |  |
| Maiden name of Mother Bissie Margarets Williams   |  |  |
| Date of this marriage June 7, 1931.   |  |  |
| Place of this marriage  |  |  |
| His address 801 N. West Sh Catholic Priest  |  |  |
| Indianapolis Ind.   |  |  |
| Witness Name Ceril L. Pigg- Catherine & Eurounger   |  |  |
| Address Leburn Sile. 1844 Derley Over   |  |  |

FILED JUN-91930

Benn B Rolston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony hu and Groom's name His age. 4 color. nude 1 occupation 4 " Birthplace--City State " Residence-Street No City Single Widower 1st, 2nd or Sre Divorced marriage ma Name of Father 10 Maiden name of Mother .11 Bride's name Her age ... u color. occupation State Birthplace-City " " Residence-Street No .Citv Single 1st. 2nd or 3rd Widow 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. 0 n His address 1 Name Witness nd ddress



Glenn B Relston

1331

| To Be Returned by Minister or Other Person Performing Ceremony |
|--|
| Elvin me Levrin and Sylvia Lee                                 |
| Groom's name. Elvin McGerrin                                   |
| His age  |
| " color  |
| " occupation I of this Co,                                     |
| " Birthplace-City Hermilize State dem                          |
| " Residence-Street No. 2212 English City Andrengodis           |
| Single<br>Widower<br>Divorced List, 2nd or 3rd Juick.          |
| Name of Father 10 2 Me Versein                                 |
| Maiden name of Mother and Matter .                             |
| Bride's nameSylvia Lee   |
| Her age  |
| " color  |
| " occupation   |
| " Birthplace-City Sugar Since State / State                    |
| " Residence-Street No. 4098, Rensephoity Indimpris             |
| Single<br>Widow<br>Divorced Ist, 2nd or 3rd<br>marriage Juito  |
| Name of Father firme die                                       |
| Maiden name of Mother France Rogland                           |
| Date of this marriage  |
| Place of this marriage India pris-                             |
| Name and title of person Of Control Minister                   |
| His address 1311 Wondhaw, Indiapolo And,                       |
|  |
| Name Church Collution  |
| Witness Address 409 South Randolph                             |
|  |

Marriage Record for Board of Health



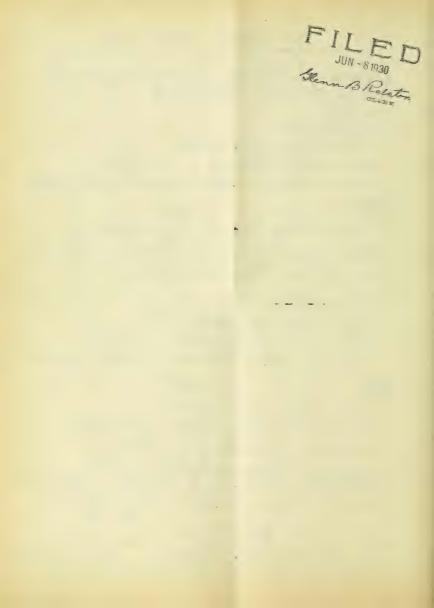
1332

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 2 and Groom's name His age .... color 4 occupation Birthplace-State " 4 Residence-Street No. City Single Widower 1st. 2nd or 3rd Divorced marriao Name of Fathe Maiden name of Mother Bride's name Her age. 4 color occupation Birthplace-" - City City а 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



1333

| Marriage Record for Board of Health                               |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony    |
| Francis S. Scheick and hyometta fowell                            |
| Groom's name Francis Scherek .                                    |
| His age 23  |
| " color It lite.  |
| " occupation Clerical Work .                                      |
| " Birthplace-City Pittsfung State Ja                              |
| " Residence-Street Nor Lyn hurcht Drivecity Indianapolio          |
| Single { 1st, 2nd or Srd }  |
| Witdower<br>Divorced  |
| Name of Father OULUES Job. Ochelick                               |
| Maiden name of Mother Oora wee Mc Donald                          |
| Bride's name Hymetta Jowell                                       |
| Her age 21  |
| " color White .   |
| " occupation Steusgraphan   |
| " Birthplace-City Indianerpolis State And.                        |
| " Residence-Street No 856 S. Demisin City Indianapolio            |
| Single Jist, 2nd or 3rd   |
| Bivorced P Anarriege  |
| Name of Father 104 D. Jowell                                      |
| Maiden name of Mother ( Dausy use Dowers                          |
| Date of this marriage fuce 7 - 1931                               |
| Place of this marriage Adraiapolio - And                          |
| Name and title of person Robert b. Kuebler - Minister             |
| His address 214 Park way ave - Indianapolio                       |
| Jul.  |
| Name Mr. Ed. Jogue 7 856 S. Denison                               |
| Witness Address Mus Ed. Joques Indianapolis                       |
| P turn this Prosent to Country Clark with License and Cartificath |



1334

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

Roy L. Van ausdall and Claire M Dit andal Groom's name. 21 His age ... color white 4 Clark occupation ..... Mianapo State " Birthplaceach " Residence-Stree City Single Widower 1st, 2nd or 3rd marriage Divorced aus Name of Father. Maiden name of Mot 0 Claire. A m ittrick Bride's name. 22 Her age ... color 4 occupation Onderna 1 State Birthplace nato ordinars Residence - City -Stre Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 14 Date of this marriage ..... Place of this marriage. Name and title of person en Performing this marriage. His address 28 n. Name Edward G. Stauber Witness Address 3020 Auckle

FILED JUN-91930 Glenn B Roeston CLENTS

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Olizabel aind Groom's name His age ... а color Co Olub Inu ck- down occupation 4 4 Birthplace -City na 60 State " Residence-Street\_No City Single Widower 1st, 2nd or 3rd Divorced marriage auto Name of Father Maiden name of Mother. E ena Bride's name Her age ..... Lite " color U occupation 6 44 Birthplace-State City 66 Residence-Street No Single 1st, 2nd or 3rd 2 Widow marriage Divorced Name of Fath Maiden name of Mother Date of this marriage Place of this marriage. ran Name and title of person Performing this marriage. His address Name Witness THEE 1321 Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony de ra DA and Groom's name ... His age. 4 color Drales 4 occupation State. 4 Birthplace -City 11 Residence-Street No ina " City Single Widower 1st. 2nd or 3rd-2 0 Ph Divorced marriage 9a CA Name of Father. 9 Maiden name of Mother Bride's name Her age. 4 color. in 4 occupation 4 Birthplace-City. State Residence-Street No m 4 City Single 1st, 2nd or 3rd Widow marriage Divorced 01 Name of Father Maiden name of Mother. is Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Bridge Address.



Glenn B Radston CLERK

1.19

1337

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| James W Blain and Rossman Morgen<br>Grooms name James W. Co lei  |
| His age 21   |
| " color_eshitt   |
| " occupation article   |
| " Birthplace-City Delly State Jenn   |
| " Residence-Street No. 4209 Kendella City In Luis  |
| Single Ist, 2nd or 3rd<br>Bivorced Ist, 2nd or 3rd<br>marriage   |
| Name of Father de herles of the  |
| Maiden name of Mother August   |
| Bride's name Assan Mayer<br>Her age 26   |
| " color es hit   |
| " occupation   |
| " Birthplace-CityState   |
| " Residence-Street No. Service Ally City Suddel  |
| Single<br>Widow-<br>Divorced Ist, 2nd or 3rd<br>marriage   |
| Name of Father & harles & Morger   |
| Maiden name of Mother Elanca Illuit  |
| Date of this marriage.<br>Place of this marriage.<br>Name and title of person<br>Performing this marriage.<br>His address.<br>Manual Del.<br>Manual Del. |
| Witness { Name   |



To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age .... 4 color 4 occupation. " Birthplace-City State Residence-Street No u City Single 1st. 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age. 4 color. " occupation ч Birthplace-City. State " Residence-Street No .City Single 1st, 2nd or 3rd Widowmarriage 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

1339.



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and INANDI Groom's name His age 21 white u color.... occupation Acent State Birthplace -City 4 64 " Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Anno Name of Father. Maiden name of Mother Bride's name 2 Her age .... color event 4 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 in de Place of this marriage .... 1111 Name and title of person Performing this marriage. His address. Name Witness Address

FILED JUN ~ 9 1930 Glenn B Relation Othere

1340

| Marriage Record for Board of Health   |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony                        |
| yrett 3 endques stredagild one wellewel wohnte  |
| Groom's name Gridan ewelling  |
| His age 18  |
| " color white   |
| " occupation Japen Kanger   |
| " Birthplace-City brace for ballstate Inf   |
| " Residence-Street No. 727 Carconf City Supple  |
| Single<br>Widower<br>Divorced   |
| Name of Father albert Lewellen  |
| Maiden name of Mother Marce Starwood  |
| Bride's name Clegicheld . Ckey  |
| Her age   |
| " color white   |
| " occupation  |
| " Birthplace-City pringful State his  |
| " Residence-Street No. 5-29 arnslde City. Indeple                                     |
| Single<br>Widow<br>Divorced Ist, 2nd.or 3rd<br>marriage                               |
| Name of Father. Charles Cherry  |
| Maiden name of Mother   |
| () @10.3/   |
| Date of this marriage fune 819 2/   |
| Place of this marriage Industry July<br>Name and title of person July Manuary of July |
| His address. In drauefalie July 1   |
|   |
| Name  |
| Witness Address   |

FILED

JUN - 9 1930 Glenn 13 Radiston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony least when b large 2 reman 25 mmer nonand 20 AX. ang Groom's name. His age 4 V " color ..... occupation. 4 " Birthplace-City State. Residence-Street No City 4 Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother em Bride's name Her age 3 13 color... 4 occupation Birthplace-City\_Qually State " mound 4 Residence-Street No. City 9 Single 1st, 2nd or 3rd Widow marriage Divorced MDS Name of Fathe Maiden name of Mother the 11.1141 Date of this marriage who was 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 Minister or Other Person Performing Ceremony ttle and Groom's nan 2 His age. C/ " color " occupation State ч Birthplace-City " Residence--Street No Single Widower 1st, 2nd or Srd Divorcel marriage ind Name of Father 0 Maiden name of Mother 20 Bride's name 2 Her age. Ľ 4 color " occupation Birthplace State " и Residence-Street No Single Widow 1st, 2nd or 3rd marriage Divorced 10 Name of Father 50 Maiden name of Mother 931 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 4 His address Name Witness



1343

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Richard Neville Palmer and Constance Elizabeth Newlin  |
| Groom's name Richard Neville Palmer  |
| His age <u>30</u>  |
| " color_ White   |
| " occupation Gainter   |
| " Birthplace-City. Dover State England   |
| " Residence-Street No. Central //spital City Indianapulis  |
| Single<br>Widower<br>Divorced 7  |
| Name of Father trederick thomas Balmer   |
| Maiden name of Mother Clizabeth Commo  |
| Bride's name Constraine Elizabeth Newlin   |
| Her age  |
| " color White  |
| " occupation Central Hospital  |
| " Birthplace-City Oaoli State Indiana  |
| " Residence-Street No. Central Hospital City Indianapolis  |
| Single Single [1st, 2nd or 3rd ] First   |
| Name of Father Rewlin  |
| Maiden name of Mother Mullie Mal Weathers  |
| Date of this marriage 8 - 193/   |
| Place of this marriage $Rev$ Navurd & and the second secon |
| His address 4927 W - 11th Street   |
| Speader of Indeana   |
| Name Martin Paimer   |
| Witness Address Hadres Harle   |

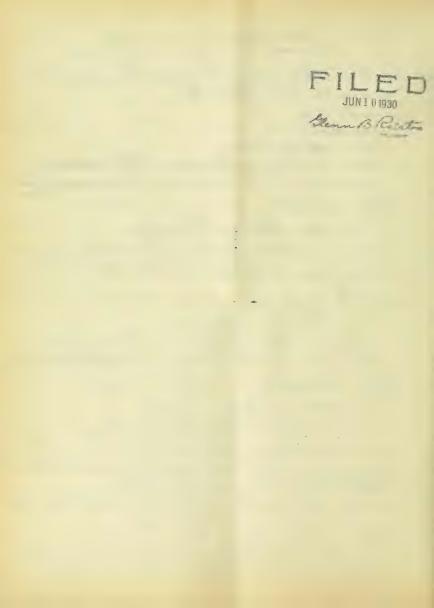
FILED JUN-81930 Glenn B Parton

1344

| Marriage Record for Board of Health                                     |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony          |
| Deare Mayuman and Ering May Soman                                       |
| Groom's name bace Thurman   |
| His age 25  |
| " colored   |
| " occupation abou   |
| " Birthplace-City Clarksvilley State Series                             |
| " Residence-Street No. 1/7 Wich the City Sudges                         |
| Single<br>Widower<br>Divorced   |
| Name of Father Belly Shurmen  |
| Maiden name of Mother Illina Coleman                                    |
| Bride's name Cuma Mar Mounan  |
| Her age 25  |
| " color_d   |
| " occupation Staugework   |
| " Birthplace-CityStateState   |
| " Residence-Street No. // Unch M. F. City Supple                        |
| Single         Nit, 2nd or Srd,<br>marriage                             |
| Name of Father Maynum white   |
| Maiden name of Mother ula Ullu  |
| Date of this marriage. June 8 - 1931                                    |
| Place of this marriage Bradiana about the Bridiana                      |
| Name and title of person<br>Performing this marriage John & Marranne JC |
| His address Dridianafolis Endiana                                       |
|   |
| Name  |
| Witness Address   |

Menus Stander LILED

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony In marta Stobert ? Groom's name His age. " color... а occupation\_O Minas State " Birthplace Tub City " Residence and Street r Single Widower 1st. 2nd or 3rd Divorced mai Name of Father Maiden name of Mother Bride's name. Her age .. 4 color 4 occupation " ...State Birthplace и Residence lme -Street City. Single 1st, 2nd or 3rd Rac Widow marriage Divorced Name of Father NO 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 Minister or Other Person Performing Ceremony and Groom's name 1 His age. u color. occupation 1/1 " " Birthplace-City State " Residence-Street No City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age. " color 4 occupation Birthplace-City " State 1233 Residence-Street No. " Single 1st. 2nd or 3rd Widow marriage Divorced-101 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 Minister or Other Person Performing Ceremony 000 and Groom's name His age 0 color white " har occupation. " " Birthplace-City State " Residence-Street No a City Single Widower 1st, 2nd or Srd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age .... d u color whe occupation. 4 State " Birthplace-City plas Residence-Street No и City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father 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 216 Address



1:48 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony MARC and NO MILAN DAD Groom's name. 9.110 His age 43 color. W и occupation...Q moun " Birthplace-City.... 4 NAMAN State 0 allon и Residence-Street No. City. Single Widower 1st, 2nd or 3rd Divorced marriage anne Name of Father Maiden name of Mother Dunn MAN Bride's name Her age 2 R 4 color. te occupation MT 4 Birthplace-City. 18 1112 man а State Residence-Street No ... MERTARIA " City. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father GAAD Maiden name of Moth NTA the Date of this marriage Place of this marriage. Name and title of person 2 Performing this marriage His address Name Witness Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Harold H. Eisenbrey and Groom's name At any His age 2/ occupation ... 7 " " Birthplace-City State mar " Residence-Street No City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age color U u occupation " 4 Birthplace 4 Residence-Street Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother 931 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address 0 Witness Address

LILED

Berne B Receter

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name. n de 10 6 His age A " color. occupation MA " 4 Birthplace-City.C 0 in State " Residence-Street No.1.2 10 8 City ana Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 11 Maiden name of Mother Bride's name Her age " color occupation " а Birthplace-City State eve. " Residence Stree 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 Л Witness Address

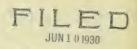
FILED JUN 1 1 1930 Glenn B Relation

1351

| Marriage Record for Board of Health  |  |  |
|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony   |  |  |
| Killin C. Jocobs and Ida F. Storylas   |  |  |
| Groom's name w C. Jeart  |  |  |
| His age 50   |  |  |
| " color ble  |  |  |
| " occupation fieles makes  |  |  |
| " Birthplace-City Say frok State Jul   |  |  |
| " Residence Street No. 1211 S. Mendin City Indiangeli  |  |  |
| Single<br>Widower<br>Divorced Lilouen [1st, 2nd or 3rd ] 3nd manige  |  |  |
| Name of Father John Frenklin Jocofs  |  |  |
| Maiden name of Mother Mallie Frithen   |  |  |
| Bride's name I da . F. Louglas   |  |  |
| Her age  |  |  |
| " color_ thite   |  |  |
| " occupation forschiefer   |  |  |
| " Birthplace-City Warrich Co. State Med.   |  |  |
| " Residence-Street No. 1211 S. Meiler City Dudrupper   |  |  |
| Single<br>Widow<br>Divorced list, 2nd or 3rd<br>marriage 3rd marriage  |  |  |
| Name of Father Jeme B. Massie  |  |  |
| Maiden name of Mother mary J. Dancy  |  |  |
| Date of this marriage frame 9th '31  |  |  |
|  |  |  |
| Place of this marriage Understand the pendrum<br>Name and title of person<br>Performing this marriage Trusta Usepenbuk |  |  |
| His address 90 & founder Induiting the   |  |  |
|  |  |  |
| Witness Name Mrs. E. a. Vujunturk  |  |  |
| Address 90 2 Aande   |  |  |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony a land. Groom's name His age " color 44 occupation elstate 0 " Birthplace -City MenCity " Residence-Street N Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother 1 Bride's name Her age. 4 color. " occupation u Birthplace State Woth " 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 ame Witness Add



JUN I U 1930 Glenn B Rolston OLINEX

1353 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Wiles Harry d. and Mary U. Sedan Groom's name Horry L. Miles His age 29 " color, white " occupation fuss driver Birthplace City New Market State Ind. " Residence-Street No. 17 86 1/2 East Tenth City Indraucholis Single Widower Divorced 1st, 2nd or 3rd Name of Father Charles O. Miles Maiden name of Mother Stella Caplinger Bride's name Mary a. Leda Her age 24 " color white occupation housekeeper Birthplace-City Judi mapoli State ... " Residence-Street No. 1434 Prospect City 1st, 2<del>nd or 3rd</del> marriage Single Widow Divorced Name of Father Calvin Jed Lena Wheller. Maiden name of Mother June 9th 1931 Date of this marriage. Indianapolis Ind. Place of this marriage. Name and title of person Emil & Boch Performing this marriage. Indianas His address 1039 June It Name Mrs Charles a. Miles 1786 1/2 Bast Fenth Witness ha Lenn Greeson 1434 Pospet It.

u

Single



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony march and Groom's name Mille His age ..... " color\_N occupation NEAN и Birthplace-City. State " Residence Street No. 525 N 1000 " City. Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father in MANAALI Maiden name of Mothe int Bride's name Her age. 4 color 1 MARN и occupation AND PRIM UNTO O 4 Birthplace - City State 535 Residence-Street No. 4 Single Widow 1st, 2nd or 3rd marriage Divorced CD. Name of Father. and. rown Maiden name of Mother Har B anna D Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address

FILED

JUNI 5 1930 Menn B Relston

1355

| Marriage Record for Board of Health                            |  |  |
|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony |  |  |
| Jouise Moghen and Richard D. Barth                             |  |  |
| Groom's name Richard D. Barth                                  |  |  |
| His age Tebryony 11, 1908                                      |  |  |
| " color White  |  |  |
| " occupation Classified Advertising, badig optin there         |  |  |
| " Birthplace-City Indinapolio State Ind.                       |  |  |
| " Residence-Street No. 4357 M. Perra. City Cadinafali          |  |  |
| Single<br>Widower<br>Divorced Jist, 2nd or 3rd<br>marriage     |  |  |
| Name of Father May burn Mr. Barly                              |  |  |
| Maiden name of Mother Corringe Haddak                          |  |  |
| Dride's name Jourish Mayber                                    |  |  |
| Her age / annorg 25, 1904                                      |  |  |
| " color White  |  |  |
| " occupation flauly operator                                   |  |  |
| " Birthplace-City Desttanille State Kentucky                   |  |  |
| " Residence-Street No. 14 01 Afren the City Conclining the     |  |  |
| Single Dingue Discond Acad Acad Marriage                       |  |  |
| Name of Father Beo. W. Mayber                                  |  |  |
| Maiden name of Mother Betty Della                              |  |  |
| Date of this marriage $6 - 9 - 31$                             |  |  |
| Place of this marriage undrangpolis undrang.                   |  |  |
| Name and title of person<br>Performing this marriage           |  |  |
| His address minister, 2nd Presbyterian                         |  |  |
| Clusch of tridianapolis  |  |  |
| Witness Name Talliam Ellistt                                   |  |  |
| Address 3210 East Juic Just Such                               |  |  |

FILED JUN 1 0 1930 Glenn 10 Paleton CILERE

1356

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |
|---|--|--|
| Glenn & Queros and Frene & Doutet   |  |  |
| Groom's name Slenn B Olivens  |  |  |
| His age 22  |  |  |
| " color schitt  |  |  |
| " occupation Chrputte   |  |  |
| " Birthplace-City Chaunstrum State Sul  |  |  |
| " Residence-Street No. Jamestana City July  |  |  |
| Single<br>Widower<br>Divorced   |  |  |
| Name of Father John & Cliving   |  |  |
| Maiden name of Mother Mary and Stuffmen   |  |  |
| Bride's name Sume & Sasseth   |  |  |
| Her age 20  |  |  |
| " color ut hit  |  |  |
| " occupation  |  |  |
| " Birthplace-City   |  |  |
| " Residence-Street No. After City   |  |  |
| Single Ust, 2sd of 8rd marriage   |  |  |
| Name of Father. Omed Sozsett  |  |  |
| Maiden name of Mother   |  |  |
| Date of this marriage   |  |  |
| Place of this marriage Du July applie Jud   |  |  |
| Name and title of person<br>Performing this marriage April & Manuary, At                              |  |  |
| His address Que due alfolis Jud &   |  |  |
| ( Name  |  |  |
| Witness Address   |  |  |
|   |  |  |

FILED

JUN 1 5 1930 Senn B Relston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony ollakerand Groom's name and All Na His age. " color Chunny " occupation lo D. " State. Birthplace -City " Residence-Street No. City. Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. 2 Bride's name Her age 111 1000 T 4 color..... istes or " occupation Birthplace State " 6 Residence-Street No. 526 " City Single 1st, 2nd or 3rd Widow marriage Divorced 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 diance Name Witness Addres

135-

FILED JUN 10 1930 Elenn B Raeston

1358

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |                                  |  |
|---|----------------------------------|--|
| Smp   | Il singetan and Wighter Willing  |  |
| Groom's nar   | ne for pla Singleton             |  |
| His age   | 23                               |  |
| " color   | WIST                             |  |
| " occupat   | ion Mechanic                     |  |
| " Birthpla  | ice-City 10 State ,              |  |
| " Residen   | ce-Street No. 2 LS with the City |  |
| Single<br>Widower<br>—Divorced  | Ist, 2nd-or 3rd-<br>marriage     |  |
| Name of Fa  | ther a, K. Singleton             |  |
| Maiden nam  | ne of Mother France Contraction  |  |
| Bride's nam   | e Flizzabeth Williams            |  |
| Her age   | 23 years                         |  |
| " color   | W luite                          |  |
| " occupat   | ion Americanife                  |  |
| " Birthpl   | ace-CityStateState               |  |
| " Residen   | ce-Street No. And City And       |  |
| • Single<br>—Widow<br>— <del>Divorced_</del>  | st, 2nd or 3rd<br>marriage       |  |
| Name of Fa  | ther N. U.                       |  |
| Maiden nam  | e of Mother.                     |  |
| Date of this  | marriage 7, 19 - 1               |  |
| Name and t  | inarriage Rev. Elizarian D. Long |  |
| His address.  | 2242 Junior at.                  |  |
| dydianafolis, Ind.  |                                  |  |
|   | Name Baul H Wilson               |  |
| Witness   | Address 1019 Hanna Aure.         |  |



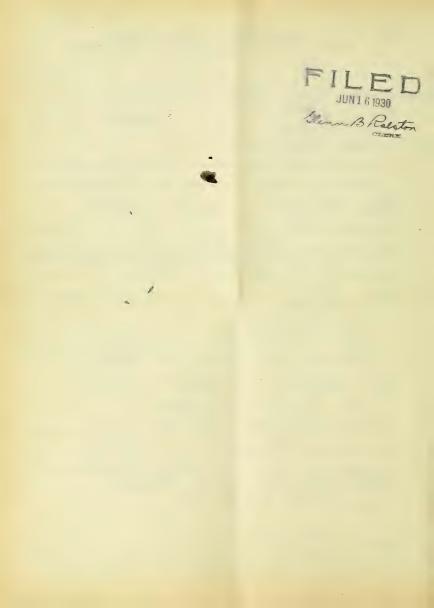
Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony an-Della Guing hur and 6. U Groom's name 2 6 His age. 1 LA A " color. prat. a " occupation  $(\lambda)$ a 44 Birthplace-City State ave " Residence-Street No Single Wideure Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother rear CA Bride's name Her age. 1 4 color 44 occupation alis OIND State " Birthplace SI ma Ulus и Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced 92 Name of Father a Maiden name of Mother. Ces Date of this marriage Place of this marriage. C Name and title of person Performing this marriage. 3 Altra U His address 00  $\wedge a$ -00 an Name Witness 899 3 H 0 Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Thomas Harely Wo and De Harley Thonas Groom's name .. His age .... le an " color..... di " occupation State " Birthplacerolt " Residence-Street No. 2 2 3 7 Single Widower Divorced 1st, 2nd or 3rd marriage 0 Name of Father 2 Blo Maiden name of Mother odo mas Bride's name Her age. u color re cuor 44 occupation shanoper Birthplace State и eston 195-6 ц Residence-Street City Single Widow 1st, 2nd or 3rd marriage Divorced nouro Name of Father Maiden name 3 anna 4 1 Date of this marriage. 1956-Place of this marriage Name and title of person h. Fr. Performing this marriage ... w. 30 115-5 His address. ule Ma Name Witness Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name -His age ... " color. " occupation " Birthplace-City Can State " Residence--Street No .City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. issée Bride's name Her age.  $\sim$ It hite 4 color.... occupation .... e " ac ч Birthplace comp State " Residence-Street Single 1st, 2nd or 3rd Widow marriage Divorced an Name of Father Maiden name of Mother. - A t Date of this marriage un Place of this marriage. Name and title of person Performing this marriage 1 His address a Name Witness Address



1362

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

|  | and                      |  |  |
|--|--------------------------|--|--|
| Groom's name Williame  | J. Lolund                |  |  |
| His age  |                          |  |  |
| " color white  |                          |  |  |
| " occupation The chanic  |                          |  |  |
| " Birthplace-City  | State state.             |  |  |
| " Residence-Street No. R. R. 7   | City In impair           |  |  |
| Single<br>Widower<br>Divorced  | Ist, 2nd or 3rdFirst     |  |  |
| Name of Father homas   | E. Colla e               |  |  |
| Maiden name of Mother / ma   | of.                      |  |  |
| Bride's name Jui Elien   | Enne                     |  |  |
| Her age ninetere   |                          |  |  |
| " color white  |                          |  |  |
| " occupation   |                          |  |  |
| " Birthplace-City Indianapolis State Ind   |                          |  |  |
| " Residence-Street No. 110 71- 15- The City Indian palis   |                          |  |  |
| Single<br>Widow<br>Divorced  | [1st, 2nd or 3rd] First  |  |  |
| Name of Father Drugen Cours  |                          |  |  |
| Maiden name of Mother Harris Aunter Trans  |                          |  |  |
| Date of this marriage 10 th June 1931  |                          |  |  |
| Place of this marriage 4455 Jundiory<br>Name and title of person Educa - Mangy Leader - The Center Spepice |                          |  |  |
| His address 4455 Bridway an impour une hy abuly  |                          |  |  |
|  |                          |  |  |
| Witness Name have ge   | rain Joio find 11 - 10 2 |  |  |
|  |                          |  |  |

FILED JUN 1 1 1930

JUNI I 1000 Glenn B Palston OLEBRE

1363

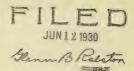
| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |                               |  |
|---|-------------------------------|--|
| Gabo Ogle Monglow   | and Visla Leurencia aller     |  |
| Groom's name talmin Offe d  | Pouglass                      |  |
| His age 23  | 0                             |  |
| " color. White  |                               |  |
| " occupation Anuran Sale  | himan                         |  |
| " Birthplace-City akron Oh  | State                         |  |
| " Residence—Street No   | City                          |  |
| Single<br>Widewer<br>Diverced   | { 1st, 2 <u>nd or 3rd-</u> }  |  |
| Name of Father W albert   | longlass                      |  |
| Maiden name of Mother Winified  | Ogle                          |  |
| Bride's name Viola L. alle  | с                             |  |
| Her age 17<br>" color Uhite   |                               |  |
| " occupation  |                               |  |
| " Birthplace-City_ Indian   | li State Ind                  |  |
| " Residence-Street No. 3908   | City                          |  |
| Single<br>Widow<br>Diverced   | [ 1st, 2nd or 3rd<br>marriage |  |
| Name of Father. John 94 10  | lfer                          |  |
| Maiden name of Mother Catherine   | nurflag                       |  |
| Date of this marriage   | 1931                          |  |
| Place of this marriage<br>Name and title of person<br>Performing this marriage                        | his E Josh - Cath Priest      |  |
| His address   | 217 Central an.               |  |
| Witness Name Gro. a llow  | glow - Restric malter         |  |
| Address   |                               |  |



1364

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

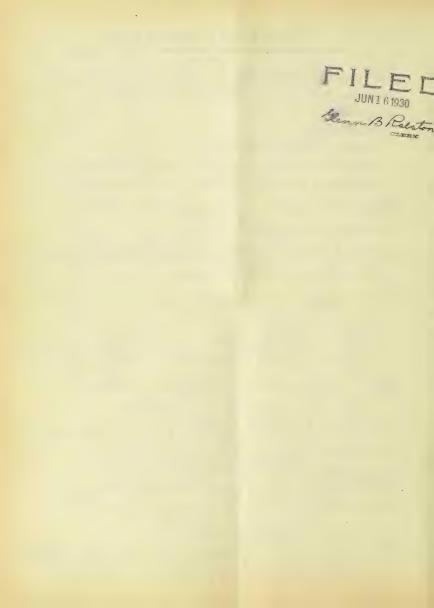
and Groom's name His age " color 44 occupation 46 Birthplace City State " Residence-Street N City Single 1st, 2nd or 3rd Widower Divorcer marriage Name of Fath Maiden name of Mother Bride's name Her age " color 4 occupation a Birthplace State 4 Residence Stre City Single Widow 1st, 2nd or 3rd marriage 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 Minister or Other Person Performing Ceremony and inter dever. ward Groom's name. ang His age 2+ " color.... A.C.C 4 occupation. (> Birthplace-City.... Indianas State.... " 835 " Residence-Street No. relo City. abola Single Widower 1st, 2nd or 3rd Divorcedmarriage Name of Father herry an Maiden name of Mother one Bride's name Her age 20 4 color..... Ter 4 occupation arabler State 4 Birthplace-City. Residence-Street No. " art en City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. Seconda Date of this marriage ... Place of this marriage. Name and title of person Performing this marriage His address. Name 10 Witness Address

FILED JUN12 1930 Slenn 13 Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Clarence Eduard More and an Groom's name Olarence dun His age 2 " color When 20 Tea occupation. hor " 44 Birthplace-City. dianapoles State Residence-Street No. 270 //eau " City 21 Ten Single 1st, 2nd or 3rd Widower Inch Divorced marriage Name of Father 10 Maiden name of Mother OAL Bride's name ene Her age 2 0 Thele. color 4 " occupation diana Doles 4 Birthplace State Residence-Street No.310 ah wes u City lance Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Con an a/12 in Maiden name of Mother\_Kula 10. Date of this marriage 21 11 Th besco e\_ 6 hurd Place of this marriage Name and title of person Performing this marriage His address 304 sur udian int Name Witness Address



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

and m Groom's name His age color..... occupation u Birthplace -City. me State 1107 н Residence-Street No. City Single furt 1st, 2nd or 3rd Widower Divorced marriage 7 Name of Father m 01 Maiden name of Mother Bride's name Her age color. occupation 4 Birthplace State и 110 Residence-Street No. 4 .City Single 1st, 2nd or 3rd Widow marriage Divorced 6 Name of Fathe 6 1x Maiden name of Mother 931 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness



| 1368  |
|---|
| Marriage Record for Board of Health<br>• To Be Returned by Minister or Other Person Performing Ceremony |
| James R. Mc Laughlingend Lorine M. Englepardt   |
| Groom's name Junes R. Mc Laughlin   |
| His age Chirty  |
| " color   |
| " occupation Chypricism   |
| " Birthplace-City Cike County State Indiana   |
| " Residence-Street No. City Hospital City Indianapolis  |
| Single Widower Ling & Ist, 2nd or 3rd First   |
| Name of Father Beorge Milton Mc Laughlin  |
| Maiden name of Mother De Mothe  |
| Bride's name Lorence M. Englishardt   |
| Her age. Thirty -one  |
| " color White   |
| " occupation Jeacher  |
| " Birthplace-City Evansville State Indiana  |
| " Residence-Street No. 5/3 Oskley City Evansville, Inc  |
| Single Ist, 2nd or 3rd First  |
| Name of Father John Englishardt   |
| Maiden name of Mother Mary Menson   |

rel. а F Single Widow Divor Name Maid 193, 10 Date of this marriage. Place of this marriage Name and title of person Performing this marriage. voura His address. yno A Name 1 Witness Address! a

Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and O NON 24 Groom's name. His age ..... " color a har occupation. State 4 Birthplace-City 65 Le City Residence-Street No. " Single Widower Ist. 2nd or 3rd Divorced marriage Name of Father. Maiden name of Mother Bride's name Her age .... 4 color 1 auc 11 hall 4 occupation Birthplace-City State 4 " 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

FILED

Ser B Relaton

.

1370

| Marriage Record for Board of Health                             |  |  |  |
|---|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony  |  |  |  |
| Jouald & Norry and Norma Mulles                                 |  |  |  |
| Groom's name blouald L. Store                                   |  |  |  |
| His age   |  |  |  |
| " colorN  |  |  |  |
| " occupation  |  |  |  |
| " Birthplace-City Judicucapello State 2017                      |  |  |  |
| " Residence-Street No. H. O. Music City                         |  |  |  |
| Single<br>Widower<br>Divorced                                   |  |  |  |
| Name of Father Kirchard J. Unu                                  |  |  |  |
| Maiden name of Mother Matild, Jong.                             |  |  |  |
| Bride's name Noura f. Muelly                                    |  |  |  |
| Her age   |  |  |  |
| " color   |  |  |  |
| " occupation  |  |  |  |
| " Birthplace-City Indian of under State                         |  |  |  |
| " Residence-Street No. 1301 Contrat and City                    |  |  |  |
| Single<br>Widow<br>Divorced                                     |  |  |  |
| Name of Father of Hisry Mulles                                  |  |  |  |
| Maiden name of Mother fulling thehrewell                        |  |  |  |
| Date of this marriage   |  |  |  |
| Place of this marriage  |  |  |  |
| Name and title of person Rev. Frank & Wicks                     |  |  |  |
| His address III & HY W W.                                       |  |  |  |
| Ludianafosti  |  |  |  |
| Name Blaur Taylon   |  |  |  |
| Witness Address New angusta                                     |  |  |  |
| Return this Report to County Clerk with License and Certificate |  |  |  |



JUN 1 2 1930 Glenn B Palston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony to and llmor Groom's name. A d His age. 4 color.. 1PA MM occupation. naboles State Birthplace-City " oma " Residence-Street 1 City Single 1st, 2nd or 3rd Widower Divorced marriage no Name of Father Maiden name of Mother. A Bride's name Her age. color. 4 Ara MA " occupation. An State 44 Birthplace-City. " Residence-Street No Cit Single 1st, 2nd or 3rd 1 Widow marriage Divorced 0 Name of Father anser Maiden name of Møther. Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address.... Name Witness acoma Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Parter Clemands M Helen Fisher blemond Wallace Groom's name 25 ans His age. lute " color nen 4 occupation Russehville Birthplace State 95-1 Residence-Street No. mirch City In 10 Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father ner Maiden name of Mother. an le llore 4, Bride's name ans 3 Her age 4 color 4 occupation 00 Birthplace State 4 Residence-Street No. //// " City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Fathe ana Maiden name of Mother. aners 931 Date of this marriage. aba Place of this marriage... Name and title of person Performing this marriage 00 His address. 6 Name Witness Addres

FILED JUN 1 2 1930

Glenn B Relation

1273

|       | Marriage    | e Record    | for Board    | of Healtl  | h        |
|-------|-------------|-------------|--------------|------------|----------|
| To Be | Returned by | Minister or | Other Person | Performing | Ceremony |

| and   |
|---|
| Groom's name Martin & Babb  |
| His age 34  |
| " color   |
| " occupation Salesman   |
| " Birthplace-City Boon Co State Indiana   |
| " Residence-Street No. 434 E. Market City Induanofall   |
| Single<br>Widower<br>Divorced<br>Name of Father Scorgs Babb   |
| Maiden name of Mother Hattie Warren   |
| Bride's name alpha Rettio Jaber   |
| Her age   |
| " color While   |
| " occupation  |
| " Birthplace-City Jamings Co State Indiance   |
| " Residence-Street No. 417 & Market City Indianafold  |
| Single   1st, 2nd or 3rd  |
| Divorced   H h h h h  |
| Name of Father Manne Hunes  |
| Maiden name of Mother   |
| Date of this marriage fine 11 /981  |
| Place of this marriage Parsonage Murritt Place Church<br>Name and title of person & Earl Janes,<br>Performing this marriage & Earl Janes, |
| His address. 312 St. Calif St. Indianapolis   |
| P. I.F. O. O. A. A.   |
| Witness Name filleau of gree  |
| Address 2/2 Kl addf ( the   |
| Between this Benert to County Clark with License and Cartificate  |



1374

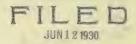
| Marriage Record for Board of Health                              |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony   |
| Osthus Barner and Sotte Hellowry,                                |
| Groom's name Uthur Brown   |
| His age 35   |
| " color  |
| " occupation Adauseman   |
| " Birthplace-City Kancasta State State Blackar                   |
| " Residence-Street No. 124 Smith City Inaple                     |
| Singler<br>Widower<br>Diversed                                   |
| Name of Father. Nenny Braun                                      |
| Maiden name of Mother Cliff Jochson                              |
|  |
| Bride's name Cattle Halling                                      |
| Her age 26   |
| " colored  |
| " occupation General Arusework                                   |
| " Birthplace-City Annul State                                    |
| " Residence-Street No. 2/10 Regulary City Subfile                |
| Single<br>Widow<br>Divorced                                      |
| Name of Father Jomas Skalloway                                   |
| Maiden name of Mother Kauna Starfel                              |
|  |
| Date of this marriage  |
| Place of this marriage   |
| His address Budunun fabilis and & J                              |
| · · · · · · · · · · · · · · · · · · ·                            |
| Witness Name Anny Withung  |
| Address 8/ 2 alleghengham  |
| Between this Bonort to County Clark with License and Certificate |

23.5 23.5 2



JUN 15 1930 Glenn B Palston CLARKE

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony oa Inca and hestor anten 16 le Groom's name. His age 4 color. eat occupation. 4 (et ynn 4 Birthplace--City State 102 501 Lichla 4 Residence Street Single 1st, and or Widower 310 Divorced marriage Name of Father nder Maiden name of Mother Bride's name Her age. 6 4 color... snone 44 occupation " Birthplace-City State 6 So farre Residence-Street No Pity Single 1st, 2nd or Srd Widow marriage Divorced Name of Father Maiden name of Mother. ING Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address en Name Witness Address Return this Report to County Clerk with License and Certificate



JUN 1 2 1930 Glenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony UMA and Groom's name His age 5 color white и 1es occupation. 4 44 Birthplace-City State Residence-Street No " City Single, 1st, 2nd or 3rd Widower Divorced marriage Name of Father acold Maiden name of Mother Bride's name 33 Her age ... color while a occupation 4 Tura 4 Birthplace State 16 Residence-Street No. 10 6 le la ч Single 1st. 2nd or Srd Widow marriage Divorsed Name of Father Maiden name of Mother. Date of this marriage Place of this marriage Name and title of person Performing this marriage 8 His address! Name Witness Address



|       | Marriage    | e Record    | for Board    | of Health  | 1        |
|-------|-------------|-------------|--------------|------------|----------|
| To Be | Returned by | Minister or | Other Person | Performing | Ceremony |

| James Wells Draher and Marjorie E. Schmidt,  |
|--|
| Groom's name. James. Wells. Draher.  |
| His age "Iwenty Years.   |
| " color.White.   |
| " occupation.TransferCo.   |
| " Birthplace-City Indianapolis,State Indiana   |
| " Residence-Street No. 618 N. Alabama St., CityIndianapolis, And   |
| Single     Single.     [1st, 2nd or 3rd]       Diversed     First.   |
| Name of FatherJohn Joseph Draher.  |
| Maiden name of Mother Elva Alice, nee Ziegler.   |
| Bride's name Marjorie E. Schmidt.  |
| Her age Eighteen Years.  |
| " colorWhite.  |
| " occupation Saleslady,  |
| " Birthplace City Indianapolis, State Indiana.   |
| " Residence-Street No.5841 Dewey Ave.,Cityindianapolis, Ind  |
| Single Widow Single. [1st, 2nd or 3rd marriage ] First.  |
| Name of Father William E. Schmidt  |
| Maiden name of Mother Stella, nee Caldwell,  |
| Date of this marriage June 11, 1931.   |
| Place of this marriage Indiananolis, IndMinister at the Fairview<br>Name and title of person fluxed faires Kistler, Presbyterian Church, Indianapoli<br>Performing this marriage Edward Haines Kistler, Presbyterian Church, Indianapoli |
| His address 5121 Kenwood Ave.  |
| Indianapolis, Ind.   |
| Witness Name Mrs. P. C. Wybourn<br>Address Psnan, Indiana  |
|  |

FILED JUN 12 1930 Slenn B Roleston

1373

| To Be Returned by Minister or Other Person Performing Ceremony   |
|--|
| Huber and Buchan   |
| Groom's name anthree John Hickory  |
| His age 31   |
| " color. Me her te   |
| " occupation Tucker  |
| " Birthplace-City. Rach Bofing State Decent  |
| " Residence-Street No. Chargelic City. Proceed '   |
| Single<br>Widower<br>Divorced Language Langua |
| Name of Father May 1 Hack  |
| Maiden name of Mother Julian Kareland  |
| Bride's name Market Cligate the Beachan  |
| Her age25  |
| " color Millerte   |
| " occupation 22pres - Cos home -   |
| " Birthplace-City 2nd langue State have  |
| " Residence-Street No 37/9 Boulevast Pl. City Baran .  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>marriage   |
| Name of Father Surf & Bucha  |
| Maiden name of Mother Juz Com  |
| Date of this marriage future 11, 1731  |
| Place of this marriage the leavest proceeding the proceeding the proceeding the proceeding of the proc       |
| His address 5318 m Delawore ST Andron fala   |
|  |
| Name It for all that   |
| Witness Address 3710 Barland Olace, Andyle   |
|  |

Marriage Record for Board of Health

FILED JUN12 1930 Alenne 13 Patron

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 0,110 and Groom's name. His age # 0 color 4 or te occupation Ruchan 4 Birthplace-City State 2001 4 Residence-Street No. City Single. 1st 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother al 211 Bride's name Her age ..... 4 colored nais occupation 4 Birthplace-City State Residence-Street No. 224 W. 2 4 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

1:71



1380

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

and al ca Groom's name His age 4 color. 1 4 occupation acco State 4 Birthplace-City. Residence-Street No 4 m .City Single -1st. 2nd or-3rd Widower Divorcedmarriage oborok Name of Father Maiden name of Mother. Seatries ester Bride's name. Her age ... 4 color. occupation corl. 4 Birthplace-City. State 110206 Residence-Street No ч City Single 1st, 2nd or-3rd lico 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



1380

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

and 01 CA Groom's name us His age. 4 color. occupation 11 4 Reco 4 Birthplace-City State Residence-Street No. " m .Citv Single Widower -1st. 2nd or-3rd Divorcedmarriage allowal Name of Father Maiden name of Mother Leatrice 0 ester Bride's name. Her age ... 4 color. 000 occupation 4 corl и Birthplace-City State Marss 4 Residence-Street No City -Single Ist, 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



1321

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

2000 he do and Groom's name His age. 4 color... occupation 4 State 4 Birthplace-City. 10 City ц Residence-Street No. Single 1st, 2nd or 3rd Widower Divorced marriage 16 Name of Father. Maiden name of Mother. Bride's name Her age ... " color. 4 occupation 4 Birthplace-City State 4 Residence-Street No ... City 00 Single 1st, 2nd or 3rd 1.00 . 100 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

FILED JUN 1 2 1930

Elenn B Ralston CLERY

382

To Be Returned by Minister or Other Person Performing Ceremony Herman 1 northers man and may Groom's name 2 His age. " color no 4 occupation a Birthplace-City State З Residence-Street No " City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother 11 nas 17 Bride's name 20, 22 Her age. u color. 4 occupation Ren 4 Birthplace-City State 3 н Residence-Street No City Single 1st, 2nd or 3rd Widow marriage Divorced 10 Name of Father Maiden name of Mother Date of this marriage Place of this marriage. Name and title of person Performing this marriage 5 His address. las Name Witness Address

Marriage Record for Board of Health



T.H'R.K.

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony aster 10 tant and ert 11 aster Groom's name His age. 1e " color 4 occupation Birthplace-City State " Residence-Street No 4 City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age 4 color. heal 4 occupation " Birthplace-City " Residence-Street No Single 1st, 2nd or 3rd Widow marriage Divorced 10 Name of Father Maiden name of Mother. Date of this marriage. Place of this marriage Name and title of person mal Performing this marriage His address Name Witness Address

FILED JUN 1 5 1930

Glenn B Ralston

1384

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Ruth Require Par Jon Ruth Rogers.   |
| Groom's name Dowald Eding Paugharn  |
| His ageJD   |
| " color   |
| " occupation finite Daly,   |
| " Birthplace-City Ale Land Benerge State  |
| " Residence-Street No City / Legetter Ministra  |
| Single<br>Widower<br>Divoreed June (1st, 2nd-or 3rd<br>marriage)                                      |
| Name of Father  |
| Maiden name of Mother   |
| Bride's name Ruth Rogers,   |
| Her age 2.4   |
| " color 2 files   |
| " occupation Brughenety person  |
| " Birthplace-City. France State   |
| " Residence-Street No. 4 cll, City  |
| Single<br>Widew<br>Divorced   |
| Name of Father  |
| Maiden name of Mother   |
| Date of this marriage frame 11, 1931  |
| Place of this marriage Meridian Heights Rep. A. Judianopolis  |
| Name and title of person Sidney Blair Harry - Minister.   |
| His address 4720 Park Ave., Indianapotes . Jul.   |
| Men & A   |
| Witness { Name  |

FILED JUNI 2 1930 Slenn B Relation

1385

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Luffery James Stout and Hagel & yold   |
| Groom's name affing James Slaut  |
| His age 24   |
| " color, white   |
| " occupation Candy Maker   |
| " Birthplace-City. Stymeral State Ind  |
| " Residence-Street No. 8 0.4 Ft. Weyn City Jappes  |
| Single<br>Widower<br>Divorced State Stat |
| Name of Father Afaward Alaut   |
| Maiden name of Mother Makley Statt   |
| Bride's name Aragel & Yoch   |
| Her age 2 3  |
| " color_white  |
| " occupation Inspector   |
| " Birthplace-City_ Sullivan State  |
| " Residence-Street No. 1711 Quigel City Inopla   |
| Single 2 Ist, 2nd or 3rd   |
| Widow<br>Divorced  |
| Name of Father Ssance Juniph   |
| Maiden name of Mother Cathurs Changel  |
| Q  |
| Date of this marriage  |
| Place of this marriage Suchumer phis and<br>Name and title of person<br>Performing this marriage   |
| His address Induswiper Jun   |
|  |
| Name   |
| Witness Address  |

FILED JUN 1 5 1930 Elenn B Ralston

CLERT

1395

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| James Strengent and and and willson   |
| Groom anne James Stewart  |
| His age JBC   |
| " color_what  |
| " occupation Alecarity  |
| " Birthplace-City   |
| " Residence-Street No. 4/8 6 Mustamer City Anappa   |
| Single<br>Widower<br>Divorced   |
| Name of Father Colloworth Second  |
| Maiden name of Mother Mangaret Me Laugher   |
| Bride's name Margaus Welson   |
| Her age 34  |
| " color white   |
| " occupation.   |
| " Birthplace-CityMastern StateState   |
| " Residence-Street No. // 3 2 2. 2014 City Dage   |
| Single     Ist, 2nd or 3rd-<br>marriage   |
| Name of Father.   |
| Maiden name of MotherMany   |
| Date of this marriage.  |
| Place of this marriage Durlin applies Dud   |
| Name and tille of person<br>Performing this marriage  |
| His address Dudunughtis Jug 80  |
|   |
| Name  |
| Witness Address   |



1387

| Marriage Record for Board of Health                                   |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony        |
| Shault Spartieren and Sertrude Winters                                |
| Groom's name Il and Argentication                                     |
| His age. 14.3   |
| " color white   |
| " occupation Frain Cecles   |
| " Birthplace-CityStateState   |
| " Residence-Street No. 5098 Man Query City 2- Alls                    |
| Single,<br>Widower<br>Divorced  |
| Name of Father  |
| Maiden name of Mother   |
| and a let it  |
| Bride's nameReallers  |
| Her age <u>35</u>   |
| " color eshit   |
| " occupation . Ausekeeper   |
| " Birthplace-City Meffsedeng State This                               |
| " Residence-Street No. 504 & New Gray City Inaple                     |
| Single<br>Wildow<br>Divorced 2-Divarced [Ist, 2nd or 3rd<br>marriage] |
| Name of Father Cleh Brandon   |
| Maiden name of Mother   |
| Date of this marriage   |
| Place of this marriage Du dum profile Surf.                           |
| Name and title of person<br>Performing this marriage                  |
| His address Judusmaficher Jud   |
|   |
| Name Mike De Fabia - 32/14 Menhow - Judges                            |
| Witness Address Demines DeFibio-3210 Minhan - Ingel                   |
|   |



388

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

and Groom's name 5-2 His age ... hile color. 4 Inspector. occupation ter Birthplace-City... anches State. 44 Residence-Street No. 27 C. 3424 St. ĸ City and Single Widower 1st, 2nd or 3rd Divorced marriage Kor. Name of Fathe Maiden name of Mother lov. Bride's name Her age. 10 4 color seener. occupation State " Birthplace a Residence-Street No. 3.2/9 " .Citv Single Widow 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 11. 1931 me Date of this marriage 3 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

FILE D

Glenn B Relaton

1389

| Marriage Record for Board of Health  |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony                     |
| Wickes and Dosch   |
| Groom's name David Ruby Wickers  |
| His age / 9  |
| " color_ white   |
| " occupation advertising   |
| " Birthplace-City State State Quid.  |
| " Residence-Street No. 1406 A alling City Dudyle.                                  |
|  |
| Single<br>Widower Heine le [1st, 2nd or 3rd<br>Divorced heine le [1st, 2nd or 3rd] |
| Name of Father Ruby R. Wigkes  |
| Maiden name of Mother Ether Understein   |
| Santhe describe Donal  |
| Bride's name Dorotay ducite Norch  |
| Her age  |
| " color  |
| " occupation Housekuper  |
| " Birthplace-City Ludgels State Lice .   |
| " Residence-Street No. 1202N. Offord City City                                     |
| Single Lingy Ist, 2nd or Sta Lingh   |
| Bivorced marriage  |
| Name of Father Cenner a. Dozch   |
| Maiden name of Mother Ida B. Bapter  |
| During (11931  |
| Date of this marriage  |
| Place of this marriage   |
| Performing this marriage   |
| His address 0911. Paul 82  |
|  |
| Name Charles E. Aiches Eloile V. Baffer  |
| Witness Address 1419 N. alney Sellersburg In                                       |
|  |

FILED JUNI 6 1930 Slenn B Rolston

1390

|    |    | Marria   | ge | Record      | for  | Board    | of  | Health           |
|----|----|----------|----|-------------|------|----------|-----|------------------|
| То | Be | Returned | by | Minister or | Othe | r Person | Per | forming Ceremony |

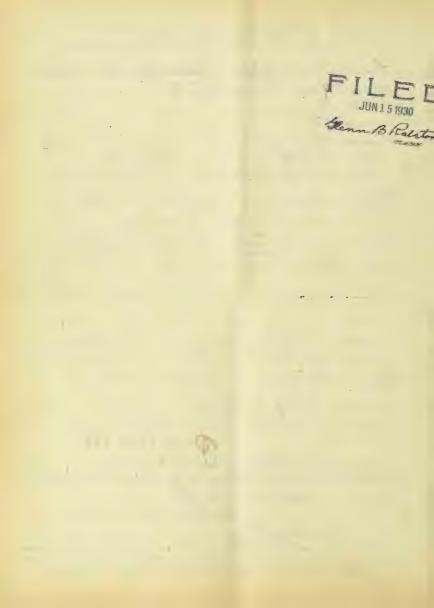
| and  |
|--|
| Groom's name   |
| His age 26   |
| " color  |
| " occupation Clerk   |
| " Birthplace-City Dankerly State Chica                         |
| " Residence-Street No. 2/2 ancard City nashly of the           |
| Single<br>Widower<br>Divorced                                  |
| Name of Father has first started                               |
| Maiden name of Mother  |
| Bride's name Puth Ruced Puth                                   |
| Her age  |
| " color  |
| " occupation   |
| " Birthplace-City  |
| " Residence-Street No. J. 2.2.6 J. MichCity                    |
| Single<br>Widow<br>Divorced Lawin (1st, 2nd or 3rd<br>marriage |
| Name of Father   |
| Maiden name of Mother C. Martine and Arig                      |
| Date of this marriage  |
| Place of this marriage   |
| His address 277 Courts 1106                                    |
| Glaquer & Hopke  |
| Witness Name Alexander Alexander and head alexander            |

FILED JUN 23 1930 Stenn B. Parto

CT.S.R.M.

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Jenow Chester Bright and Helen Harrah nest Groom's name Losen Chesters Br His age 21 " color. 41 hite gardene truck occupation .... 4 Birthplace-City. State Residence-Street No. " City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father. et. Maiden name of Mother.... enterno Bride's name Her age ... color. occupation 4 Birthplace-City 750 Pleas Residence-Street No. z а Single 22 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 Ju Name Witness

39



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony utur a and Groom's name. His age ... 4 color. occupation " State " Birthplace-City. Residence-Street No. City и Single -1st. 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother leinie Bride's name Her age. 4 color. 4 occupation 4 Birthplace-City State 4 Residence-Street No. Citx Single 4 1st, 2nd or 3rd Widow 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

1392



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and enn ands a and Groom's name. da His age " color .... man occupation. 1/4 Birthplace-Otty State end u Residence-Street No. Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. ara anna Bride's name Her age ... 4 color occupation u Birthplace-4 Residence-Street No City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. n 200 Maiden name of Mother. 3 un Date of this marriage. Place of this marriage. Name and title of person Performing this marriage. 2 and His address 20 Name Witness Address Return this Report to County Clerk with License and Certificate

FILED JUNI 6 1930 Slenn B Reest

274

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Harot Acund Inag A du hannand Groom's name His age 2 color white 44 erh occupation ... 4 Birthplace-City State " " Residence-Street No City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother Bride's name Her age .... color whe " occupation 4 44 Birthplace-City State Residence-Street No. 4 6 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

FILED JUN 1 5 1930

Glenn B Raliton

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

| Edward Sydney English and Marie Sophia Johnson,  |
|--|
| Groom's name Edward Sey lucy Euglif  |
| His age  |
| " color White  |
| " occupation Sandsleppe architert  |
| " Birthplace_City Jueland State  |
| " Residence-Street No. Ala gieldo kroshiliek Bucity Indianopplio   |
| Single<br>Widower William (1st, 2nd or Srd Second.<br>Marriage Second.   |
|  |
| Maiden name of Mother  |
| Bride's name Marie Sophie Johnson  |
| Her age  |
| " color white  |
| " occupation Mane Medler   |
| " Birthplace-City_ Severe deState  |
| " Residence-Street No. 765 Mad way City Everet Wars  |
| Single<br>Widow<br>Divorced } Lingle { 1st, 2nd or 3rd<br>marriage } First.  |
| Name of Father   |
| Maiden name of Mother Curry Autoroan   |
| Date of this marriage June 12, 1931.   |
| Place of this marriageIngianapolis, Indiana.<br>Name and title of person Church Triver Vieter — Minister at the Fairview<br>Performing this marriage Edward Haines Kistler, Presby terian Church, Indpla |
| His address 5121 Kenwood Ave.,   |
| INDIA APOLIS, IND.   |
| Name Welllable (Wm. C. Mabee).   |
| Witness Address A849 North Capiler ton Saleaughelis  |
|  |

FILED JUN 1 6 1930 Glenn B Ralston -17 t ÷. \*

1396

| Marriage Record for Board of Health   |  |  |  |  |  |
|---|--|--|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony                                    |  |  |  |  |  |
| Jestiels antically rested one flat Marit millile  |  |  |  |  |  |
| Groom's name William Srand Stall  |  |  |  |  |  |
| His age 34  |  |  |  |  |  |
| " color white   |  |  |  |  |  |
| " occupation leanstruction work   |  |  |  |  |  |
| " Birthplace-City Canverse State Ind  |  |  |  |  |  |
| " Residence-Street No. 858 Buchannes City Ludyla  |  |  |  |  |  |
| Single,<br>Widower<br>Divorced Ist, 2nd of 3rd<br>marriage  |  |  |  |  |  |
| Name of Father Anno Stale   |  |  |  |  |  |
| Maiden name of Mother Mary Merkay   |  |  |  |  |  |
| the the matter as it al   |  |  |  |  |  |
| Bride's name 6 staw Martha Mester   |  |  |  |  |  |
| Her age 28  |  |  |  |  |  |
| " color white   |  |  |  |  |  |
| " occupation Sundary work   |  |  |  |  |  |
| " Birthplace-CityState  |  |  |  |  |  |
| " Residence-Street No. 1365 a larly City Inapla   |  |  |  |  |  |
| Single<br>Widow<br>Divorced   |  |  |  |  |  |
| Name of Father lo Apileo J. Mastyl  |  |  |  |  |  |
| Maiden name of Mother. Saphia Ambel   |  |  |  |  |  |
| No. 12 -195/  |  |  |  |  |  |
| Date of this marriage   |  |  |  |  |  |
| Place of this marriage. Du Munuel of the Start of Performing this marriage. As and S. Manuary, A. |  |  |  |  |  |
| His address Indrawalthe Jud 1   |  |  |  |  |  |
| Witness Name Mary Hall  |  |  |  |  |  |
| Address / 2 212 X. Sheffull flive   |  |  |  |  |  |
|   |  |  |  |  |  |

. FILE C JUN 15 1930 Stenn-B. P. t.

1397

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Sound Suzoth and Soulla Buelling  |
| Groom's name Annuel Leventh   |
| His age 24  |
| " color Whitt   |
| " occupation Dutyku   |
| " Birthplace-City Cast mairie State Ms  |
| " Residence-Street No. 906 offer City Intele  |
| Single<br>Widower<br>Diverced Ist, 2nd or 8rd<br>marriage   |
| Name of Father Mutter Severett  |
| Maiden name of Mother Betty Cogsill   |
| Bride's name Luella Buchner   |
| " color white   |
| " occupation  |
| " Birthplace-City_ Inapla State Ind   |
| " Residence-Street No. P. J. Bay 66 2 City. Indepla   |
| Single<br>Widow<br>Divorced Single Ist, 3nd or-3rd marriage   |
| Name of Father Aylett Buchne  |
| Maiden name of Mother   |
| Date of this marriage   |
| Place of this marriage Dir Sugar Dig  |
| Name and title of person<br>Performing this marriage Law & Manuny                                     |
| His address Du draw Aprila Sud 1  |
|   |
| Witness NameAddress   |
|   |



Glenn B Ralston CLURRE

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony marker aller sucily 2000 and Groom's name His age e in 44 color. MON ann occupation. lan Birthplace-City State " Residence-Street No., City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age ... 11 " color. occupation. House Birthplace-City State una ч Residence-Street No. City Single 1st, 2nd or 3rd Widow n f marriage Divorced Name of Father Maiden name of Mother de de 17 Date of this marriage 20 Place of this marriage. Name and title of person in Performing this marriage His address Name Witness Address



1390

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony where Wesley Martin and Holen uniri mas Groom's name 8 His age " color occupation Birthplace-City. State nnt N Insedo 26 City 11 44 Residence-Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother 3110 Bride's name Her age. 4 color. occupation. mati u Birthplace-- City anonCity 4 Residence-Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. d A 9 11/1 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 Minister or Other Person Performing Ceremony NenA Groom's name. His age 43 color white 4 ren man occupation laco State Birthplace-City 4 Residence-Street No Single Widower 1st 2nd or 3rd Divorced marriag Name of Father Maiden name of Mother lea Bride's name Her age..... color..... while! lamesto! occupation Birthplace-City he State 4 Residence-Street No ч Single Ist, 2nd or 3rd 0 Widow marriage Divorced 1 111 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 880 Name Witness Address

FILEE JUN 1 5 1930 Semm B Relation . . . .

40

To Be Returned by Minister or Other Person Performing Ceremony is fr. and kredella Francis Ca npbell res Marri Groom's name. Acura His age ..... White " color ... Garage man и occupation echor Birthplace-City ... " Residence-Street No. 804 Wes Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Credella trancis Carab Bride's name. 17 Her age. Ma color ment occupation Po utte Birthplace State Melras Residence JE ц -Street City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. 931 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. lis His address 110 Name Witness 8.3-Address 130

Marriage Record for Board of Health



+17

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

and alau howalter Groom's name His age .... color.... w 4 occupation Clerk 4 Birthplace-City\_Wabash 4 State 41 " Residence-Street No. 2906 City Single Widower uel 1st, 2nd or 3rd Divorced marriage andla www Name of Father. 11. Maiden name of Mother Bride's name er. Her age ... " color... n " occupation. Birthplace-City\_du mulaus. State 4 Balsaus " Residence-Street No. 3609 Chrs. City Single / Widow 1st, 2nd or 3rd marriage Divorced mate Name of Father Vaul Maiden name of Mother. Date of this marriage. Ine. 12.-Place of this marriage. Name and title of person Performing this marriage His address toe ler Name Witness andrews Address July haling Return this Report to County Clerk with License and Certificate



1403

| Marriage Record for Board of Health  |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony   |
| George WN anipuer and Can Burks  |
| Groom's name. Dis. M. Wanteren   |
| His age  |
| " color mile   |
| " occupation bullmoor toalle and   |
| " Birthplace-City teucoch State dans   |
| " Residence-Street No City_umburiant   |
| Single<br>Widower<br>Divorced [1st, 2nd or 3rd<br>[action of the second se      |
| Name of Father Arry Januprer   |
| Maiden name of Mother Minma Prior  |
| Bride's name, East Buska   |
| Her age  |
| " color White  |
| " occupation Icacher   |
| " Birthplace-City Marion State find  |
| " Residence-Street No. R. R. # 10 m 2 -3 City Indianapples   |
| Single<br>Widow<br>Divorced Ist, 2nd or 3rd<br>marriage  |
| Name of Father Lange Ourpa   |
| Maiden name of Mother Economica Nacoorch   |
| Date of this marriage fine 2 43  |
| Place of this marriage have supported that the second seco |
| His address 2 67 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6   |
| D D D D D D D D D D D D D D D D D D D  |
| Witness Address 52/ June We Sight  |
| ( AUUICSS  |



JUNI 6 1930 Glenn B Palston CLERK

1404

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

and Der Groom's name His age ... и color rig " occupation " Birthplace-City State Residence-Street No " City Single Widower 1st, 2nd or 3rd Divorced marriage m TP Name of Father Maiden name of Mother Bride's name Her age. 4 color. " occupation State Birthplace-City " Residence-Street No 4 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 Address

FILED JUNIT 1930 Menn B Reeston

1405

| To Be Returned by Minister or Other Person Performing Ceremony  |
|---|
| Harold & Best and any H. Lewine   |
| Groom's name_ Harris Harrison   |
| His age   |
| " color   |
| " occupation CurR   |
| " Birthplace-City   |
| " Residence-Street No. 5 2 3 5 monolaum City. City.   |
| Single<br>Widower<br>Divorced 1st, 2nd or 3rd<br>marriage   |
| Name of Father  |
| Maiden name of Mother Marguette, Burk   |
| Bride's name Carry H. Henric  |
| Her age 2.8   |
| " colorUtit   |
| " occupation tales lasy   |
| " Birthplace-CityState  |
| " Residence-Street No. Hardwealingto City. Marchan  |
| Single Life And Single |
| Name of Father  |
| Maiden name of Mother   |
| Date of this marriage   |
| Place of this marriage  |
| His address.  |
|   |
| Witness Name  |
| Address Address   |

Marriage Record for Board of Health





466

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 0 0 11.14 and Groom's name. . 32 His age ..... uli " color. 1100 101 occupation wallor Birthplace-City. State 44 4 Eas Residence-Street No. City " Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother Bride's name Her age .. 4 color. occupation Birthplace-City. State City Residence-Street No. а Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. Date of this marriage na Place of this marriage. Name and title of person Performing this marriage. His address. 50 Name Witness Address

FILED JUNI 6 1930 Glenn B Raleton

4-0

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Bril and G His age 30 color whet To occupation Birthplace -City State Residence-Street No. City а Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 1-Maiden name of Mother. Bride's name mal Her age..... 4 color.... occupation. State Birthplace-City Residence-Street No. u Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother Date of this marriage. NN alle Place of this marriage. Name and title of person 0 Performing this marriage. His address. Name Witness Address



40%

|       | Marriage    | e Record    | for B   | oard   | of  | Health           |
|-------|-------------|-------------|---------|--------|-----|------------------|
| To Be | Returned by | Minister or | Other ] | Person | Per | forming Ceremony |

and 02 1-Groom's name d. TAI His age. W m · ... " color 4 occupation Birthplace n. 4 -City State ros Residence 4 Single Widower ist, 2nd or 3rd Divorced marriage N Name of Father 2-1 Maiden name of Mother Bride's name 21 Her age. In 74 color Z occupation Birthplace ĸ City Stale - 2 " Residence tv Single Ast, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother 12 81 Date of this marriage Place of this marriage Name and title of person Performing this marriage ave His address Name Witness Addre Return this Report to County Clerk with License and Certificate

FILED JUN 1 6 1930

Glenn B Relaton CLEEK

7

1409

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                |
|--|
| Willie Buttler and Bladys Gooduns  |
| Groom's name Will Buttler  |
| His age  |
| " color  |
| " occupation il carrary  |
| " Birthplace-City menship State f. Jem   |
| " Residence-Street No. 35 25 Lerris City Induspolis In   |
| Single<br>Widower<br>Divorced single [1st, 2nd or 3rd ] furnt marriage   |
| Name of Father Jerry Buttler   |
| Maiden name of Mother Burtha Reed  |
| Bride's name Gladys Goodums  |
| Her age /8   |
| " color don't colord   |
| " occupation house noark   |
| " Birthplace-City columbus State Lenn  |
| " Residence-Street No. 10.2? Collon City Interrupolis in   |
| Single Widow<br>Divorced Jungle [1st, 2nd or 3rd marriage furst morrage  |
| Name of Father Audson Dooduns  |
| Maiden name of Mother Bessie Jowel   |
| Date of this marriage June 13 1931   |
| Place of this marriage <u>3525</u> Jurres Judianspolen<br>Name and title of person Rev nullearn St. Sampley minister |
| His address 1205 Nondemon and  |
| Indranspolis dut   |
| Winner Name Dessie Harris  |
| Witness Address 127 Colton Intonapolin   |

FILED JUNI 6 1930 Stenn B Ralston

14-15

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Cobert Mc Donald Blake and pizzie Elizabeth Coffey   |
| Groom's name Robert MC Donald Blake  |
| His age 3.2  |
| " color. White   |
| " occupation Book / Ceeper   |
| " Birthplace-City JamesTown State Jem  |
| " Residence-Street No. 5.35 Jones St. City Indianopolin  |
| Single<br>Widower<br>Divorced Jungle [1st, 2nd or 3rd<br>marriage ] Junst  |
| Name of Father Samuel Undrew - Slake   |
| Maiden name of Mother Mrsley Mucido Stewart  |
| Bride's name Ilizzie Elizabeth Coffey  |
| Her age 7  |
| " color - M hille  |
| " occupation The Frank of the Trank of the T |
| " Birthplace-City // Onla Callo State / Canterney  |
| " Residence-Street No. 4-04 W. M.J. City Inframapour   |
| Single<br>Widow<br>Divorced  |
| Name of Father filson G. Cerry   |
| Maiden name of Mother A Charles Gr and Dyley   |
| Date of this marriage  |
| Place of this marriage Indian Spolis Ind   |
| Name and title of person RAME Comm Ondained Missister  |
| His address 234 TV Deleware Street   |
| Name Month Sural.  |
| Witness Address 5-2.7. The general Address   |

FILEL JUN 1 6 1930 Slenn B Palator

141

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony ans an and Groom's name His age 28 " color. wit u occupation mans Ci " Birthplace-City. State Residence-Street No. 2 4 4 City Single Widower 1st, 2nd or 3rd Divorcedmarriage Name of Fathe an Maiden name of Mother Bride's name 3 Her age ... A 4 20 color. occupation k Birthplace 4 State 9 и 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 ũ Performing this marriage His address Name Witness 2 Address Return this Report to Clerk County License and Certificate with

FILED

JUNI 61930 Glenn B Relation

1412

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony           |
|---|
| Walter & Dur and Mary Bello Carpenta  |
| Groom's name Nalle E. Dron  |
| His age 37  |
| " color. White  |
| " occupation framm  |
| " Birthplace-City Laf ag Mb State   |
| " Residence-Street No. 1205 Willy 5h City   |
| Single       Widower       Divorced         P         Istr 2nd or 3rd       marriage                            |
| Name of Father Charles 6  |
| Maiden name of Mother Certa Pullor  |
| Bride's name Mary Brille Carpenta   |
| Her age 3 P   |
| " color. HTuto  |
| " occupation alle dead  |
| " Birthplace-City Corrughi Ky State Keula Mg  |
| " Residence-Street No. 2/ E Fo Lor City Jucken Ach  |
| Single<br>Widow<br>Divored 1st, 2nd or 3rd<br>marriage  |
| Name of Father albert C Covry   |
| Maiden name of Mother Centra Curlis   |
| Date of this marriage June 13/1981  |
| Place of this marriage 2/ E. D. Dr.<br>Name and title of person Ren Ar Centry Brown<br>Performing this marriage |
| His address. // Scory Ceff.   |
| Witness Name Mr. Jenny Lithan<br>Address 2/ E. D. Dor   |



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

1413

| Edwin John Haerle and Edna Virginis Sheets                                       |
|--|
| Groom's nameEdwin.John.Haerle.   |
| His age24_years  |
| " color  |
| " occupationLawyer   |
| " Birthplace-City Indiana. Indiana.  |
| " Residence-Street No. 2049 N. Capitol City Indianapolis                         |
| Single     Widower       Divorced     Ist, 2nd or 3rd                            |
| Name of Father John William Haerle.  |
| Maiden name of MotherEmma_Simonson   |
| Bride's name Edna Virginia Sheets  |
| Her age 24 years   |
| " color White  |
| " occupation None.   |
| "Birthplace—CityJolietStateIllinois  |
| " Residence-Street No. 3419 N. Pr. St. City Indianapolis                         |
| Single<br>Widow<br>Divorced     Single     1st, 2nd or 3rd<br>marriage     First |
| Name of Father Harbert Paul Sheets   |
| Maiden name of Mother_Myrtle_Banks.  |
| Date of this marriageJung. 13, 1931.   |
| Place of this marriage<br>Name and title of person<br>Performing this marriage   |
| His address 3174. I Deswork  |
|  |
| Name Thomas F. O'Connor  |
| Witness Address 905 Inland Bank Bldg, Indianapolis, Indiana.                     |

Return this Report to County Clerk with License and Certificate

nam S. Stood and

FILED JUN 23 1930

1414-

| To Be Returned by Minister or Other Person Performing Ceremony |
|--|
| Robert Johnson and Beatrice Subler                             |
| Groom's name_ Robert Johnson                                   |
| His age 2/   |
| " color  |
| " occupation Suborer   |
| " Birthplace-City_ KarnilleState                               |
| " Residence-Street No  |
| Single<br>Widower<br>Divorced                                  |
| Name of Father   |
| Maiden name of Mother  |
| Bride's name Bealice and                                       |
| Her age  |
| " color  |
| " occupation   |
| " Birthplace-CityStateState                                    |
| " Residence-Street No. 1828 5. Staffine McCity. Landels        |
| Single<br>Widow<br>Divorced     Ist, 2nd or 3rd<br>marriage    |
| Name of Father an kuller                                       |
| Maiden name of Mother. Wittis Cifley                           |
| Date of this marriage  |
| Place of this marriage. Many C. Merrod Rev.                    |
| His address 2728 Contend Place                                 |
| 2 his hat a  |
| Witness Name<br>Address \$25 N, Pratt St.                      |

Marriage Record for Board of Health

FILED JUNI 6 1930 Glenn B Relation

OLENN

1415

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Walter E. McChutochand Thelma S. Jettas   |
| Groom's name Walter 6. Mccluitock   |
| His age 37  |
| " color_ 20 hiti  |
| " occupation Mechanic Deleo Reney Corp andereon and   |
| " Birthplace-City Askpon Townshiptate Curl  |
| " Residence-Street NoCity   |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>marriage  |
| Name of Father Cluck E. McClucker   |
| Maiden name of Mother. Elila Jeoria Vise  |
| Bride's name Ipelina Louise yattan  |
| Her age 2   |
| " color   |
| " occupation  |
| " Birthplace-City Marian State mg   |
| " Residence-Street No. 829 Supermore City Inducer and   |
| Single<br>Widow<br>Divorced [1st, 2nd or 3rd<br>marriage  |
| Name of Father b. harles outly a haplaw.  |
| Maiden name of Mother. Brown  |
| Date of this marriage June 13 1931  |
|   |
| Place of this marriage And unapple to and the performing this marriage Aw Matter B Summers            |
| His address 4906 Manlove ave  |
| Indianapolito And   |
| Name Miro ada L Grunes  |
| Witness Address 4906 Manlove ave Induanepolos   |

FILED JUN 22 1930

Glenn B Relston

1412

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony    |
|--|
| Paul J. Neurmand Helen E. Lauter   |
| Groom's name / and Meuris and  |
| His age 31   |
| " colorUlute   |
| " occupation Munature Sul Course Ourur   |
| " Birthplace-City Judianopolis State Jud   |
| " Residence-Street No. 3032 M. Mer City in dianapply   |
| Single<br>Widower<br>Divorced  |
| Name of Father House U Numan   |
| Maiden name of Mother  |
| Bride's name It due & hautin   |
| Her age  |
| " color. White   |
| " occupation Ing Rhady   |
| " Birthplace-City Indianapolis State and   |
| " Residence-Street No. 304 6 Warlington City Indian of the   |
| Single<br>Widow<br>Divorced  |
| Name of Father Ulfred Lauten   |
| Maiden name of Mother literal lidenstickly   |
| Date of this marriage  |
| Place of this marriage<br>Name and title of person<br>Performing this marriage<br>Ruy, Hunth J. C. Winks |
| His address <u>111 L. 44 Us</u> Mr.  |
| alle to it   |
| Witness Name Haman Lauren<br>Address 3944 Warhunden Borlinand  |
| Return this Report to County Clerk with License and Certificate  |
|  |



417

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony mul nam and · d. Groom's name years His age ..... 2 color... " Plas terer occupation 4 12 un tra " Birthplace-City .... State Residence-Street No. " 1. In City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. wind Manne Bride's name Her age ..... color N P. to " Clienter l occupation Birthplace-City. State 4 Residence-Street No. 500/ 4 Single Widow 1st, 2nd or 3rd marriage Divorced Ward Name of Father Mance Maiden name of Mother. ANDO 13 Date of this marr Place of this marriage Name and title of person Performing this marriage His address Name Witness Address

FILED JUNI 6 1930 Glenn B Relston

1-1-1

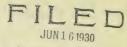
1418

| Marriage Record for Board of Health                                      |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony           |
| Jale D. Stout pand 4 Delphine Coffing                                    |
| Groom's name Gale D. Storet 00 1   |
| His age  |
| " colorUtlete  |
| " occupation Mullician   |
| " Birthplace-City  |
| " Residence-Street No. 2010 N. Mudrau City Sudraugo Uls                  |
| Single<br>Widower<br>Divorced Divorced Ist, 2nd or 3rd<br>marriage       |
| Divorced marriage  |
| Maiden name of Mother A Wining as Chumuring                              |
| C. Dollar haling   |
| Bride's name L. Delphine Loging  |
| " color While  |
| " occupation multicidus  |
| " Birthplace-City_ Corrigeton State Julians                              |
| " Residence-Street No. R. #117 City. Ludiauaprix                         |
| Single<br>Widow Aisonew [1st, 2nd or 3rd] 200                            |
| Divorced   |
| Name of Father   |
| Maiden name of Mother  |
| Date of this marriage Jull 13, 1931                                      |
| Place of this marriage 1304 M (in dudicus apoles                         |
| Name and title of person<br>Performing this marriage Rev E. J. Schweidel |
| His address 1304 N. Oakland Cure   |
| Quaiana fortes, dudiana  |
| Witness { Name Are Cana B  |
| Address dud a cur a folla, bud ana                                       |
|  |



41-

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Groom's name His age ... no 46 color\_k 4 occupation handle 111 Birthplace-City Ul State " Residence-Street No. 6 " n 1 .City Single Widower 1st. 2nd or 3rd Divorced age Name of Father Maiden name of Mother. Bride's name Her age color. " 4 occupation nogod a Birthplace-City State / - 0 и Residence-Street No. / . had .City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother 202 US Date of this marriage Place of this marriag Name and title of person Performing this marriage His address. Name Witness Address 11



Glenn B Pelston CL-RE



1420

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Emnete H. Silver Home and Barbara M. Mullurany  |
| Groom's name Emmito H. Lilnathorne  |
| His age 21  |
| " color. White  |
| " occupation Engenner .   |
| " Birthplace City Lionstille, State Judiana   |
| " Residence-Street No. Lacopauce City Inducio   |
| Single<br>Widower<br>Divorced Juce glu: [1st, 2nd or 3rd<br>marriage] Jurst                           |
| Name of Father / aller and for home   |
| Maiden name of Mother March Margh N   |
| Bride's name Barbara M. Mulleleaux.   |
| Her age 24.   |
| " color. White .  |
| " occupation Abuse duties   |
| " Birthplace-City_ Cysher State Risk mycuca   |
| " Residence-Street, No. Inclumpation City Fudealan  |
| Single<br>Widow<br>Divorced [1st, 2nd or 3rd<br>marriage  |
| Name of Father John Mullimeans.   |
| Maiden name of Mother aller Simuelt   |
| Date of this marriage / 13" 1931.   |
| Place of this marriage Rochnille. Indeaira  |
| Name and title of person<br>Performing this matrices Frank M. Sman. A.                                |
| His address / Oclingly. Shallaina/  |
|   |
| Witness Name & Alla Jugan   |
| Address Jocknille. Indiana"   |



421

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

and illiam Coule U Groom's name His age ... color W. " Walken an occupation Birthplace -City State un. Residence-Street No 4 Cit Single Widower 1st, 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother Bride's name Her age. color. " 4 occupation State Birthplace 4 - City Residence-Street No 4 Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother Date of this marriage 13 Place of this marriage. Name and title of person Performing this marriage. 10 8 His address Maller 100 0 Name Witness 1434 N. Delaway Address



Glenn B Rolston CLARS

1422

| Marriage Record for Board of Health                            |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony |
| Earl Atevenson Trig and marle Evera Daugefield                 |
| Groom's name East Alweinson Crang                              |
| His age 28 yrs   |
| " color  |
| " occupation Japles  |
| " Birthplace-City Centymatty State this                        |
| " Residence-Street No. 911 Noachy City Sugpo.                  |
| Single<br>Widower<br>Divorced -1st, 2nd or 3rd<br>marriage     |
| Name of Father Coder and Ro Trang                              |
| Maiden name of Mother Collar Starburgers                       |
| Bride's name that be chera Aaugerfield                         |
| Her age 20 440   |
| " color Callo + lead   |
| " occupation FED cher  |
| " Birthplace-City Judienschofforty State Jud                   |
| " Residence-Street No. 870 W 20 W City June BS                 |
| Single<br>Widow<br>Divorced State (1st, 2nd or 3rd<br>marriage |
| Name of Father Aced Alugebell                                  |
| Maiden name of Mother Mary MR Bucks                            |
| Brand, 14 1921   |
| Date of this marriage  |
| Place of this marriage   |
| His address. Indraughalis and                                  |
|  |
| Name Thomas Goig Mary Daugebule                                |
| Witness Address Durchedurchalis high                           |
|  |



1423

|    |    | Marria     | ge l | Recor   | d f | for I | Board  | of  | Health           |
|----|----|------------|------|---------|-----|-------|--------|-----|------------------|
| To | Be | Returned b | y M  | inister | or  | Other | Person | Per | forming Ceremony |

| and  |
|--|
| Groom's name of frances & Aroso                            |
| His age Twenty one   |
| " color  |
| " occupation driver  |
| " Birthplace-City Rokonia State bulliany                   |
| " Residence-Street No. 1015-E. Dudly City Klienepflin      |
| Single<br>Widower<br>Divorced list, 2nd or 3rd<br>marriage |
| Name of Father   |
| Maiden name of Mother Jennie Kirkpatrick                   |
| Bride's name Adam Vivien Craig                             |
| Her age eventeen d   |
| " color white  |
| " occupation Clark   |
| " Birthplace-City  |
| " Residence-Street No. Judly & Line City Friday Street     |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>marriage   |
| Name of Father.  |
| Maiden name of Mother. Chroa Corrunta (                    |
| Date of this marriage                                      |
| Place of this marriage                                     |
| Name and title of person<br>Performing this marriage       |
| His address  |
| (Elgender) Vallengelis, tal.                               |
| Name Mrs. Jamie F. Poland                                  |
| Witness Address Track + Indiana                            |



424

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

and Groom's name His age. an 4 color. u occupation 4 Birthplace State " Residence-Street No City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother Aluce Bride's name. Her age. u color. . . 22 occupation н Birthplace-City State " Residence-Street No Oit Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 0 3 Date of this marriage Place of this marriage Name and title of person Performing this marriage His address Wan H. Walkes Name. Witness deguapol Address Return this Report to County Clerk with License and Certificate

FILED JUNI 11930 Glenn B Relation

•

,

+

1425

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony lerto and Groom's name His age. color... occupation saluman Birthplace-City State Residence-Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 14 Maiden name of Mother. Bride's name Her age ... color... Il acietos occupation. Birthplace-City State Residence-Street No. .Citv Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father easi Maiden name of Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. 2360 8 Name. Witness Address

"

" "

4

44



Glenn B Ralston

and the second s

1.1

1726

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

and Fille de Groom's name m 1. 13 His age. " color 01 Maro occupation " Birthplace-City > State " " Residence-Street No. an Dru City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father -Maiden name of Mother 110 Bride's name Her age. 4 color. 4 occupation u 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 an. Address



1427

| Marriage Record for Board of Health  |
|--|
| To Be Returned by Minister or Other Person Performing Ceremony   |
| Emmit C. Whilehouse and Uwa J. Baldevin  |
| Groom's name Emmed - C. While Rouse  |
| His age 21   |
| " color_ White   |
| " occupation Kuiller   |
| " Birthplace-City Harrodsburg State Kentucky   |
| " Residence-Street No. 915 Feland st City Sudiangfolie, Sud:   |
| Single<br>Widower<br>Divorced Lingle [1st, 2nd or 3rd/<br>marriage ] [1st  |
| Name of Father Aussile Whitehouse  |
| Maiden name of Mother Mannie Courlin   |
| Bride's name Work J. Buldwin   |
| Her age 2.0  |
| " color While -  |
| " occupation Fransferrer   |
| " Birthplace-City Washington State Sudiana   |
| " Residence-Street No 509 E. 10th st City Indianafolies, Jud,  |
| Single<br>Widow<br>Divorced Airgh [1st, 2nd or 3rd ] /st-  |
| Name of Father How and Baldwin   |
| Maiden name of Mother Optics Stoange   |
| Date of this marriage June 14, 1931  |
| Place of this marriage Unford Divition Church, Sudianafolis, Jul.<br>Name and tille of person<br>Performing this marriage W. Warm, Weinister |
| His address 1040 M. Delaware pt., Indianafolis, Inf.   |
| Witness { Name Cerel Hodyy<br>Address 52 C. 17th Jk  |
|  |



1428

|                                | l for Board of Health<br>or Other Person Performing Ceremony |
|--------------------------------|--|
| for to B                       | twold be below in  |
| Groom's name. Frish V.         | Bernes   |
| His age 4-8                    |  |
| " color_while f                |  |
| " occupation delegation        |  |
| " Birthplace-City              | State.   |
| " Residence-Street No. 21/ G-/ | City   |
| Single_<br>Widower<br>Divorced | 1st, 2nd or 3rd-<br>marriage                                 |
| Name of Father.                | Nº aluna   |
| Maiden name of Mother          | De Trees   |
| Bride's name Walle             | Black  |
| Her age                        |  |
| " color milito                 |  |
| " occupation                   | eard   |
| " Birthplace-City.             | State  |
| " Residence-Street No.         | City   |
| -Single<br>Widow               | str. 2nd or 3rd marriage                                     |
| Divorced J<br>Name of Father   | E laser:   |
| Maiden name of Mother          | Marie  |
|                                | and the second second  |
| Place of this marriage         | () under Ba  |
| Name and title of person       | annue of   |
| His address Quality applie 3   | A Sur  |
|                                | , , , , ,  |
| Witness Name Charlatt          | 3 Short  |
| Address 211 G                  | 7 4 (  |

FILED JUN 1 7 1930 Glenn B Ralston

1427

|       | Marriage Record      | l for Board o     | f Health           |
|-------|----------------------|-------------------|--------------------|
| To Be | Returned by Minister | or Other Person P | erforming Ceremony |

|  | and                                |
|--|------------------------------------|
| Groom's name Ellis H. Fry  |                                    |
| His age 48   |                                    |
| " color_ White   |                                    |
| " occupation Jelephone E   | gineer                             |
| " Birthplace-City Clash  | Co State_ brod.                    |
| " Residence-Street No.   | City Los angeles of Caf            |
| Single<br>Widower<br>Divorced  | 1st, 2nd or 3rd                    |
| Name of Father Jacob J. J.   | 40                                 |
| Maiden name of Mother. Sarah E   | . Kobertaon                        |
| Bride's name althe B. Carr   |                                    |
| Her age 47   | · ·                                |
| " color White  |                                    |
|  | len .                              |
| " Birthplace-Citylefferron   | na Ol                              |
| R  | state me                           |
| " Residence—Street No. 2/9 /2  | winghen City morenages to one      |
| Single<br>Widow<br>Divorced  | 1st, 2nd or 3rd           marriage |
| Name of Father Leo. W. Carr  |                                    |
| Maiden name of Mother Jose phe   | ne lerry                           |
|  | - 1921                             |
| Date of this marriage fund 13  | 1131                               |
| Place of this marriage<br>Name and title of person<br>Performing this marriage | v. Fler Minister                   |
| His address marapolio.   | Grid                               |
|  | 77                                 |
| Witness Name Renneth   | V. Jry                             |
| Address  | f                                  |

FILED JUNI 8 1930 Glenn 13 Relation

-1 - 1. 1"

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Groom's name His age 56 color white " abor occupation. " seil\_State 4 Birthplace-City. Residence-Street No .....City 4 Single 1st, 2nd or 3rd. Widower Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. color whe и occupation arlass la 4 Birthplace-City. State 4 Residence-Street No 11 City 4 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

1430

FILED

Glenn B Ralston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony ladjus of the start 102 Groom's name ... His age. " color .... " occupation u Birthplace MAAState. 8 " City\_L Residence Street Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father 2 Maiden name of Mother 11 19 Bride's name Her age. " color occupation. " Birthplace-City State 4 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

431



432

|       | Marriag     | e Record    | for Board    | of Health           |
|-------|-------------|-------------|--------------|---------------------|
| To Be | Returned by | Minister or | Other Person | Performing Ceremony |

and N eter Groom's name. His age. T) color. " 1.12. occupation " State. " Birthplace-City. de na 17/2 -" Residence-Street No. 4160. ACity Single 1st, 2nd or 3rd Widower Divorced marriage t Name of Father... Can B Maiden name of Mother. 0 Bride's name. 1101 0 Her age .... 1 .... 70 . . color.... " " occupation Birthplace-City. indianap la State 4 и Residence-Street No. 4 76 Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother.... 31 June 1 Date of this marriage. unanolis Cm Place of this marriage. Name and title of person / Performing this marriage. G 34 91 olini 12 His address andoris and Name. Witness 78 Address.



Glenn B Ralston

1433

| To Be Returned by Minister or Other Person Performing Ceremony  |
|---|
| albert Taylor and Kathleen Kelly  |
| Groom's name albert Tuylor  |
| His age 20  |
| " color White   |
| " occupation blerical Park  |
| " Birthplace-City_Malicon State had   |
| " Residence-Street No. 63. J. New pracy City Juleacespoles  |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>marriage  |
| Name of Father phys pylor   |
| Maiden name of Mother Sullian Vough   |
| Bride's name faithleen Kelly  |
| Her age 2-1   |
| " color Jr hite   |
| " occupation Typesst  |
| " Birthplace-City malanapolis State Ind   |
| " Residence-Street No. 1013 S. Scurate City Judianapoleo  |
| Single Uidow Lice State |
| Maiden name of Mother Bridget / Sullivan  |
| Date of this marriage June 15, 1931<br>Place of this marriage Indianaforles ma<br>Name and title of person<br>Performing this marriage Rev. M. Bosley - Minutes   |
| His address 126 W. Cscargia th - meplo  |
|   |
| Witness Name James P Kelly - Mary Univ bloody<br>Address /0/3 Struct - 10/37 Structer   |

Marriage Record for Board of Health



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony illiam N witim and 20 m Groom's name William William His age Arr 23 color White " occupation. Sten. 10 Birthplace-City State " 4 Residence-Street No. City Single cher Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age. color 72 171/0/1 occupation Birthplace " City State Residence-Street No. " 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. 34 His address Name Witness an

434



1435

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

Cliffua Zug sn and Groom's name 24 His age .. Unite color ... our. 4 occupation а Birthplace-City..... State. u Residence-Street No. 3.0 City Single med Name of Father Maiden name of Mother Bride's name Her age white 4 color 4 occupation Birthplace aron 4 City State u 220 Residence -Street No. Single Widow marri Divorced Name of Father Maiden name of Mother 3 me lo Date of this marriage. 1 no tro Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



1426

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Kayne Grace and abe Groom's name 3.3 His age. White 4 color. achmist " occupation Lal. a å -City Birthplace State montity Residence -Street No Single Widower 1st, 2nd or 3rd Divorced marriage 1281 Name of Father no Maiden name of Mother Bride's name in Her age White 4 color her occupation dianapples 4 Birthplace State lo -2 Z Residence-Street No. 6 City Single Widow 1st, 2nd or 3rd marriage Divorced no Name of Father a Maiden name of Mother. 1 111 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. 126 ia His address Name Witness Address

FILED JUNI 16 1930 Sem B Rolaton

1437

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Eugure R. Clifford and Julling Purson   |
| Groom's name Ricyne R. Differt  |
| His age 27  |
| " color   |
| " occupation Reportin   |
| " Birthplace-City du dumon State Mr-1   |
| " Residence-Street No. 1142 M. Py City Inling Mary  |
| Single<br>Widower<br>Divorced list, 2nd or 3rd<br>marriage  |
| Name of Father Hadling  |
| Maiden name of Mother Warry Hollon Jewolly  |
| Bride's name Sullin Pumm  |
| Her age L1  |
| " color   |
| " occupation  |
| " Birthplace-City hadian And State  |
| " Residence Street No. 2703 M. Dy City Indian   |
| Single Widow Divorced Last 2nd or 3rd marriage  |
| Name of Father  |
| Maiden name of Mother.  |
| Date of this marriage   |
| Place of this marriage  |
| Name and title of person<br>Performing this marriage  |
| His address Lii 2 44 Un Mr  |
|   |
| Name Ray wind Ballin  |
| Witness Address and my aby  |
|   |

FILED JUNIT 1930 Senn B Releta

1438

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Hereafie Chastil and Dirginia lest   |
| Groom's name Charlie Chestnut  |
| His age -2/  |
| " color_ white   |
| " occupation Medanist  |
| " Birthplace-City Laura State Ay   |
| " Residence-Street No. 4/6 6. // the City Supple   |
| Single<br>Widower<br>Divorced  |
| Name of Father Charles Chestrut the  |
| Maiden name of Mother ily Janson   |
| Bride's name Diegeneic Scatt<br>Her age 21   |
| " color white  |
| " occupation   |
| " Birthplace-CityMooresville_State   |
| " Residence-Street No. Morrisoulle City Ind.   |
| Single<br>Widow<br>Divoreed  |
| Name of Father   |
| Maiden name of Mother Costfur Suppy  |
| Date of this marriage  |
| Place of this marriage Dynamic Place of this marriage Dynamic Place of the Place of |
| His address. Dushumalfflit. Such   |
| Witness { Name John O'Brien - 1/24 Flitcher and 2nd<br>Address Stelen Braka - 1806 Olive - Indas   |
| Potenny this Powert to County Clark with Lissues and Contiferate   |

FILED JUNIT 1930 Slenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony on. ..and Groom's name 35 His age 4 color occupation Birthplace -City. State " Residence -Street No Vidówer Ist, 2nd or 3rd marriage vorced Name of Father. Maiden name of Mother Bride's name Her age color 44 occupation 4 Birthplace и Residence-Street No Single Ist, 2nd or 3rd marriage Divorced Name of Father iac 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

739



Light ar

440

To Be Returned by Minister or Other Person Performing Ceremony Clime doroth. bele mte and les 1 Groom's name 2 His age .... 111 hite 4 color restonden и occupation 00 07 Birthplace State Gits 2 4 Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage 4. Name of Father B 15 Maiden name of Mother Lorothy li Bride's name 21 Her age ... white " color rogropher 4 R occupation gole 00 4 Birthplace State `S Jaster ч Residence-Street No. Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father deri Maiden name of Mother u Date of this marriage Place of this marriage .... Name and title of person Performing this marriage. 0 11 His address Name Witness Address

Marriage Record for Board of Health

FILE D

Genn B Relation ------

1441

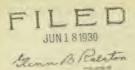
| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Herbert Herselah Long and Liftin beegling Marchina  |
| Groom's name Helter Herschel Imay   |
| His age 3   |
| " color. Whatt  |
| " occupation Blumy Eller  |
| " Birthplace-City Bring In State July   |
| " Residence-Street No. 57+ 22 Burgess and City In drynapoly July                                      |
| Single<br>Widower<br>Divorced }   |
| Name of Father Dannul 2000  |
| Maiden name of Mother Bussy and Migles  |
| Bride's name Lilling Celling Marching   |
| Her age. ?  |
| " color, White  |
| " occupation NTNL   |
| " Birthplace-City grunne for State Sund   |
| " Residence-Street No. 34 18 West Michildity Indum applie Jul   |
| Single<br>Widow<br>Divoreed   |
| Name of Father Allth Massing  |
| Maiden name of Mother_Many_Ruluen   |
| Date of this marriage   |
| Place of this marriage Dulling about Sud  |
| Name and title of person<br>Performing this marriage. Alun & Manuny                                   |
| His address Queden Spolie Sud & J   |
| / Name  |
| Witness Address   |
|   |

FILED JUNITION Stenner B Relation

1442

| To Be Returned by Minister or Other Person Performing Ceremony  |
|---|
| Unban & Milanbaugh and Frances Kathern Harting  |
| Groom's name urban & Milenbaugn   |
| His age <u>2</u> 2  |
| " colorshite  |
| " occupation Ancking  |
| " Birthplace-City Dank County State Ohio  |
| " Residence-Street No   |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>marriage  |
| Name of Father Edward Mileubary   |
| Maiden name of Mother Elzabeth Richling   |
| Bride's name Frances Kathayn Hartman  |
| Her age   |
| " color white   |
| " occupation auch Say Mursery   |
| " Birthplace-City Didians polo State  |
| " Residence—Street NoCity   |
| Single<br>Widow<br>Divorced Of Control [1st, 2nd or 3rd marriage]   |
| Name of Father Marles Hautican  |
| Maiden name of Mother Kalling Judkins   |
| Date of this marriage   |
| Place of this marriage Andianabocis<br>Name and title of person<br>Performing this marriage W19 Furmer mounta |
| His address Induana policy  |
|   |
| Witness { Name  |
|   |

Marriage Record for Board of Health



1443

| Marriage Record for Board of Health   |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony                                  |
| allie Hard her and But any Shelton  |
| Groom's name allie Harred Manning   |
| His age 22  |
| " color_ White  |
| " occupation Auchu Driver   |
| " Birthplace-City   |
| " Residence-Street No. 9.2.9 6. Wash City Dryples   |
| Single<br>Widower<br>Divoreed   |
| Name of Father Manning  |
| Maiden name of Mother Clig Mc Ollak   |
| Bride's name Ruthann Shelton  |
| Her age   |
| " color_white   |
| " occupation  |
| " Birthplace-City Indpla State Ind  |
| " Residence-Street No. 4407 "Mars Con City Dandyla  |
| Single<br>Widow<br>Divorced   |
| Name of Father lo Marlio Shiltons   |
| Maiden name of Mother Ruth white  |
| Date of this marriage   |
| Place of this marriage In Annany of Annany Anna Anna Anna Anna Anna Anna An                     |
| His address. Tuchou up his Juck &   |
| Witness Name Cadita Mallio - 1407 Mars and Super<br>Address Allie Stewart - 11/2 6 ge ash to Ly |
| Return this Report to County Clark with License and Castificate                                 |

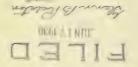
FILED JUNIT Man Glenn B Paliton

1444

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

| Guard Emeren Giller and Elvera hargaret Schein  |
|---|
| Groom's name Gerald Emerson miller  |
| His age 2.3   |
| " color white   |
| " occupation Banner Finanting 3   |
| " Birthplace-City Detroit State State   |
| " Residence-Street No. 702 N Benerry City Gallo   |
| Single<br>Widower<br>Divoresd   |
| Name of Father Harry J. miller  |
| Maiden name of Mother   |
| Bride's name Elevera prayaret Schein  |
| " color that  |
|   |
| " occupation Steary office<br>"Birthplace-City Baltsvilly State Ind .   |
| " Residence-Street No. 602 N Bancon City. Grafles.  |
| Single ] [1et 2nd - 2 ]   |
| Divorced let, 2nd or 5rd Inarriago  |
| Name of Father Arthur Schein  |
| Maiden name of Mother Cilla Steinfort   |
| Date of this marriage   |
| Place of this marriage Alexandres had -<br>Name and title of person<br>Performing this marriage Asplutture minister |
| His address 4015- C. Masfarthy H.   |
| Indewroph & Ind.  |
| Name Mrs Missellican  |
| Witness Address 2562 Nousion  |

LEVEY PRINTING CO., INDIPLS. 27868 \$2-80



1

Ener B Rewit 0261 1 I NOF FILED

1445

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Level & But in and tathorn Hartwett   |
| Groom's name Lean I Dayton  |
| His age _2/   |
| " color white of  |
| " occupation Isda Dispenses   |
| " Birthplace-City Men albany State Just   |
| " Residence-Street No. 948 & Tel Der City Interface   |
| Single<br>Widower   1st, 2nd or 3rd   |
| Divorced  |
| Name of Father Spacher autor  |
| Maiden name of Mother   |
| Bride's name Athryn angeline Startnett  |
| Her age 21  |
| " color white   |
| " occupation  |
| " Birthplace-CityClevelandState   |
| " Residence-Street No. 9.01 M. Mers Jany City Terophy   |
| Single<br>Widow<br>Divorced   |
| Name of Father Colorad John Startigutt  |
| Maiden name of Mother Alica White   |
| Date of this marriage   |
| Place of this marriage Quality and a super-   |
| Name and title of person<br>Performing this marriage  |
| His address Durbrund Die Quel 8   |
| V   |
| Witness Name Mic Friending V. Lucid<br>Address M. A. Mun Janey - Fight                                |
|   |

FILED JUN 17 1930 27, 1. 15

446

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony sma Jummerand -Groom's name. mm KITE color. 4 2 occupation husines 44 Birthplace " -Citv State Residence-Street No lleg " City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ... te " color... и occupation Birthplace-4 - City State. ц Residence-Street No City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 1 DAA Date of this marriage. Place of this marriage .... 1.0 Name and title of person Performing this marriage. His address. Name Witness Address. all

FILED JUNI H 1930 Semme /B /Baleton

144

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

and Groom's name Paul Shideler His age LL3 color white Photogras а occupation. diquapolis u Birthplace-City State. Residence-Street No. 2943 neuwood and Cit Single Widower divor 1st, 2nd or 3rd Divorced marriage intel Name of Father Behrmes Mother Maiden name of mabel M 112 heeler Bride's name. 41 Her age color white Newspaper reporter occupation. 4 Birthplace-City Indianapolis State " Residence-Street No. 2946 N. ellurs City " unsfalls Single 1st, 2nd or 3rd marriage loca Widow Devoices Divorced a men Name of Father NMA Lemo Maiden name of Mother... pore June 16 - 1931 Date of this marriage. Place of this marriage 2946 Elmois 20 -Name and title of person Loore, pastor ( Rev. n. e Performing this marriage. Calitor His address. Name. Witness Address



1448

| To Be Returned by Minister or Other Person Performing Ceremony |
|--|
| blicauto in an all and   |
| Groom's name William Graneis etuneiler                         |
| His age 🥄  |
| " color White  |
| " occupation Machinet  |
| " Birthplace-City. Journes Certing State Mo                    |
| " Residence-Street No. 2317 Strum are City Judianafradig July  |
| Single<br>Widowar<br>Divorced Ust, 2nd or-3rd marriage         |
| Name of Father Shully Amurally                                 |
| Maiden name of Mother Latter Sulling                           |
| Bride's name Gene Celle Bloomfield                             |
| Her age  |
| " color White  |
| " occupation Downtee   |
| " Birthplace-City Dullumphi State Jud                          |
| " Residence-Street No. 1722 Sharm all City Sullimater the      |
| Single<br>Widow<br>Divorced     Ist, 2nd or 3rd<br>marriage    |
| Name of Father. Jarie Bloomfully                               |
| Maiden name of Mother Slinence level                           |
| Date of this marriage  |
| Place of this marriage Sudulu offold Sull                      |
| Name and title of person<br>Performing this marriage           |
| His address. Tudiou afaly Sul                                  |
| [ Name   |
| Witness Address  |

Marriage Record for Board of Health

Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., INDIPLE. 27868 \$2-80

FILE Glenn 13 h

4-4-01

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Robert Mc Done Brownand Elfro furtintes Wypon  |
|  |
| His age 2.5  |
| " color V2 futy  |
| " occupation P Typicin   |
| " Birthplace-City Marin State John State   |
| " Residence-Street No. Rily Hofter City Indone for   |
| Single<br>Widower<br>Divorced Jungie (1st, 2nd or 3rd<br>marriage<br>Name of Father Jerry A. Brown   |
|  |
| Maiden name of Mother Miny Jone Me Honrill   |
| Bride's name Elfie Justinde Wyson  |
| Her age 26   |
| " color white  |
| " occupation Clerk   |
| " Birthplace-City J-Morff State J. C.  |
| " Residence-Street No. 17 W. 2 & & Et City Junior for  |
| Single<br>Widow<br>Divorced Jungle [1st, 2nd or 3rd<br>marriage ]  |
| Name of Father Ruse Wysory   |
| Maiden name of Mother  |
| Date of this marriage.   |
| Place of this marriage provide the second se |
| His address 1935 N. Mundum   |
| $7/$ · · · P · · m $\leq h$  |
| Witness Name Ougune Outro III - Jute   |
| Address 923 / Baussoft   |

FILED JUNI 19 1930

-

450

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony & and Groom's name His age... 4 color mar Lesman 1 occupation. State Birthplace-City " Residence-Street No. 1534 lity Single Widower 1st, 2nd or 3rd Divorced' marriage Name of Father als Maiden name of Mother Bride's name Her age .... 4 color 111 occupation ou Birthplace State " 80 14 а Residence-Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage 17. Ces 11 Place of this marriage Name and title of person Performing this marriage His address au Name. Witness 330 Address



1451

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony              |
|--|
| Buckhard and Conter  |
| Groom's name Joseph GH. Burkhard   |
| His age 30   |
| " color  |
| " occupation Carpenler   |
| " Birthplace-City Cincinatti State Shir<br>" Residence-Street No. R. R. # 2 City Indplo.                           |
| Single<br>Widower<br>Divorced List, 2nd or 3rd Just  |
| Name of Father Joseph & Support  |
| Maiden name di Mother Catherine Hess   |
| Bride's name Mary H. Cutter  |
| Her age 25 0   |
| " color white  |
| " occupation stenggrafsher   |
| " Birthplace-City Deensburg State Ing.   |
| " Residence-Street No. 3/25 Melle Correct , Indfils  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd fift  |
| Name of Father Henry Cutter  |
| Maiden name of Mother Margaret Weisbach  |
| Date of this marriage June 17 20, 1931   |
| Place of this marriage (Suthangpolis<br>Name and tile of person<br>Performing this marriage Dev. Thomas J. Dilfoil |
| His address 1347 M. Meridian St. 4   |
| Indianapolis, Ind.   |
| Name Robert Meuling - Julia Bestly   |
| Witness Address Indianapolia   |
|  |

...



452

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

er, Davis Thomas and Mary Hran cer Me Jan Tomar James Groom's name Vern His age ... W color..... 2. Cartan occupation Birthplace-City Willie State 4 " Residence-Street No.33/3 enjoy City Single Widower nd 11-1 1st, 2nd or 3rd Divorced marriage renord Name of Father mar Maiden name of Mother. ary france Bride's name Her age ..... color. 1. occupation 11a Birthplace-City. State Residence-Street No. in woon u Single Widow 1st, 2nd or 3rd un marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. 1100 Place of this marriage Name and title of person Performing this marriage His address Name Witness Address

FILED JUN 28 1930 Slemm B Router

1453

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Fred & Garnett and Guera Lorens Hoffman  |
| His age  |
| " color. White   |
| " occupation Stoch buyer   |
|  |
| THE REAL PROPERTY AND A RE |
| " Residence-Street No. 600 For Mundur City Just 2000   |
| Single<br>Widower<br>Divorced<br>Divorced  |
| Name of Father Lauren Laruett  |
| Maiden name of Mother. Sauma Sammer  |
| Bride's name anna forensa Hoffman  |
| Her age  |
| " color. While   |
| " occupation planuporters  |
| " Birthplace-City Judiaughtlesstate Judiaua  |
| " Residence Street No. 220 En clis City Judiaughtlis   |
| Single<br>Widow<br>Divorced Divorced [1st, 2nd or 3rd ] 2W   |
| Name of Father Martin trances Hagply   |
| Maiden name of Mother Catherine D Binned   |
| Date of this marriage  |
| Place of this marriage Control of the Shurch, fudious polis due<br>Name and title of person<br>Performing this marriage Rub E- 3 Schweider   |
| His address 1304 1° Chabland Cive  |
| Judianapolis Jud   |
| Name Struck A Lodge  |
| Witness Address 1018 Parken are.   |



54

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Humphreis ucille n. Sutherling Groom's name His age ..... " color 104 occupation " " Birthplace-City State Residence-Street No City " Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ... 4 color occupation 14 Birthplace Stat " " 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 les His address Name Witness an Address

FILED JUN 23 1930 Slenn B Ralston OLERK

| 1453  |
|---|
| Marriage Record for Board of Health   |
| To Be Returned by Minister or Other Person Performing Ceremony                                |
| John W. Hall and Max Trimble  |
| Groom's name John W. Hall   |
| His age   |
| " color Whitz   |
| " occupation Permi, R. R. Hostley   |
| " Birthplace-City Stanton State Kentechy  |
| " Residence-Street No. Jadianapoli City. 3  |
| Single     2 nd     1st, 2nd or 8rd       Widower     Ist, 2nd or 8rd     marriage            |
| Name of Father HEANTY C Hall<br>Maiden name of Mother Hauncie Ficklin                         |
| Bride's name Mar Trimble  |
| Her age 34 yrs  |
| " color white   |
| " occupation  |
| " Birthplace-City Johnson Court State Kantresky   |
| " Birthplace-City Johnson County State Kantesky<br>" Residence-Street No. Midiance polis City |
| Single<br>Widow<br>Bivored  |

LEVEY PRINTING CO., INDIPLE. 27868 \$2-80

Name of Father .....

Maiden name of Mother...

funa 17" Date of this marriage ... 193

doaura

Carl Simples

ha Place of this marriage..... drana Name and title of person 5 Performing this marriage WE Woods His address Indian anna Name 1. Witness Address Andrane 152 alle

Pinkk

FILE C Genn 13 Paliton

456

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Lenningend Groom's name His age White 4 color. occupation " State Birthplace " " Residence Sti Single V Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother .0 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. lus Date of this marriage ADOLA Place of this marriage Name and title of person Performing this marriage His address erele Name Witness Address



.

145

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony wand solona Haadon. and lan AA 11 Groom's name His age 19 " color white erk occupation 4 State " Birthplace-City " Residence-Street No. City Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mothe Bride's name Her age..... color white " occupation State Birthplace-City u ч Residence-Street No. City 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 merriage. His address Name Witness Address



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



1454

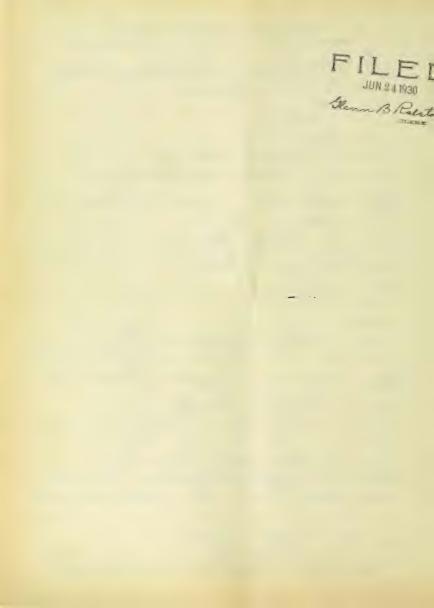
|       | Marriage    | e Record    | for Board    | of Health           |
|-------|-------------|-------------|--------------|---------------------|
| To Be | Returned by | Minister or | Other Person | Performing Ceremony |

| Roger P. Kiley and Idelen Frances Hoffman   |
|---|
| Groom's name Roger P. Kley  |
| His age 21 years.   |
| " color   |
| " occupation Store auditor  |
| " Birthplace-City. Indiana State Indiana  |
| " Residence-Street No. 1241 Ballefortance City.   |
| Single<br>Widower<br>Divorced   |
| Name of Father William F. Kiley   |
| Maiden name of Mother. Cattonia me Cartly   |
| Bride's name Idelin Frances Idoffman  |
| Her age 21 years.   |
| " color   |
| " occupation advant Cashier   |
| " Birthplace-City_VincennesState Ondiana  |
| " Residence-Street No. 43 45- College City.   |
| Single<br>Widow     Ist, 2nd or 3rd<br>marriage   |
| Name of Father William P. Hoffman   |
| Maiden name of Mother May Down  |
| Date of this marriage   |
| Place of this marriage Indianapolis, Indiana<br>Name and title of person<br>Performing this marriage Minuad Itoffman, Catholie Just |
| His address. St. Merinad abby St. Merinad, and  |
| Witness Name Elaise Hoffman & Derold Kiley  |
| Witness Address   |



1460

| Groom's name & Novel Lyons and Cathryn Fronky<br>Groom's name & Novel Lyons and Cathryn Fronky<br>" color. Whice<br>" color. Whice<br>" color. Whice<br>" color. Whice<br>" color. Whice<br>" a color. Street No. Ytere wood, City for first<br>" Residence - Street No. Ytere wood, City for first<br>" Residence - Street No. Ytere wood, City for first<br>" Maiden name of Mother Edith Streen<br>" color. White<br>" color. White   | Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|--|---|
| Groom's name 4: Novel Lyous<br>His age 24<br>" color   | To be Returned by Minister or Other Person Performing Ceremony  |
| His age 24<br>" color While<br>" occupation dale surian<br>" Birthplace-City dreawood state for a<br>" Residence-Street No. "Incurroool, City for discored<br>" Residence-Street No. "Incurroool, City for discored<br>" Madeen name of Mother Edith Breue<br>Bride's name Cathryn Farley<br>Her age 18<br>" color White<br>" occupation<br>" Birthplace-City Indication griss State Surian<br>" a color White<br>" Residence-Street No. 2111 Mile City Indication<br>" Residence-Street No. 2111 Mile City Indication<br>" Ist, 2nd or ord<br>" Ist, 2nd or ord<br>" Residence-Street No. 2111 Mile City Indication<br>" Ist, 2nd or ord<br>" Ist, 2nd or ord<br>" Ist, 2nd or ord<br>" Residence-Street No. 2111 Mile City Indication<br>" Ist, 2nd or ord<br>" Ist, 2nd or ord<br>" Residence-Street No. 2111 Mile City Indication<br>" Ist, 2nd or ord<br>" Ist, 2nd ord<br>" Ist, 2   | 9. Word Iyons and Cathryn Harley  |
| " color White<br>" occupation lacessing<br>" Birthplace-City Greenwood state for a<br>" Residence-Street No. Greenwood, City for discovery<br>Single Single Single Ist, 2nd or 2nd Trinst<br>" marriage<br>Name of Father Ourses Fygues<br>Maiden name of Mother Edith Green<br>Bride's name Cathery Farley<br>Her age 18<br>" color White<br>" occupation   | Groom's name y. nore Lyous  |
| " occupation delession<br>" occupation delession<br>" Birthplace-City Greenwood State dud<br>" Residence-Street No. Yellew rooof, City Judician<br>Single<br>Withowar<br>Divoced Judice Ist, 2nd or Brd<br>Maiden name of Mother Edith Green<br>Maiden name of Mother Edith Green<br>Bride's name Catheryn Farley<br>Her age 18<br>" color White<br>" occupation   | His age 24  |
| " Birthplace-City Greenwood State for a Residence-Street No. Green State for a green of the state of the stat   | " color While   |
| " Residence-Street No. <u>Ween wood</u> , City Juleinen<br>Single<br><u>Witwer</u><br><u>Divorced</u><br>Name of Father. <u>Current</u><br>Maiden name of Mother.<br>Bride's name <u>Cathryn</u><br>Her age.<br>" color<br>" cocupation<br>" occupation<br>" occupation<br>" occupation<br>" accupation<br>" accupat | " occupation salesman   |
| Single<br>Windower<br>Diversed<br>Name of Father Quices Figures<br>Maiden name of Mother Edith Green<br>Bride's name Cathryn Farley<br>Her age. 18.<br>" color White<br>" color White<br>" occupation  | " Birthplace-City greewood State dud  |
| Witness       Junglo       Ist, 2nd or 2nd       Status         Name of Father       Queen       Fygues         Maiden name of Mother       Eaith       Strew         Bride's name       Cathryw       Farley         Her age       18, 2nd or 2nd         " color       White         " color       White         " occupation       "         " Birthplace-City       Status         " Residence-Street No.       2111         Maiden name of Mother       Status         Single       Status         Widow       Status         Maiden name of Mother       Blausche         Bridstore       Status         Single       Status         Widowr       Status         Name of Father       Euwenth         Maiden name of Mother       Blausche         Backet       To Brd         Date of this marriage       Status         Place of this marriage       Status         Maiden name of Mother       Status         Place of this marriage       Status         Maider of Status       Status         Maider of this marriage       Status         Maider of this marriage       Status<  | " Residence-Street No. There wood City fulica   |
| Maiden name of Mother Edith Green<br>Bride's name Cathryn Farly<br>Her age 18<br>" color   | Widower Ist, 2nd or ord VI MAF  |
| Bride's name Cathryn Farly<br>Her age 18<br>" color.<br>" color.<br>" birthplace-City Induction yeis State And<br>" Birthplace-City Induction yeis State And<br>" Residence-Street No. 2111 Millin City Inductory<br>Single Strington 1st, 2nd or Ord<br>Midor Diversed<br>Name of Father Eliment Frarly<br>Maiden name of Mother Blanche Beken<br>Date of this marriage Induction Beken<br>Date of this marriage Induction State<br>Name and tile of person<br>Performing this marriage And Cather Manual State<br>His address. 326 S. Jan Marrie June<br>Witness   | Name of Father Ours Types   |
| Her age  | Maiden name of Mother Edith Green   |
| " color White<br>" occupation  | Bride's name Cathryn Forly  |
| " color White<br>" occupation  | 17 1  |
| " Birthplace-City <u>Juscian Jesis</u> State <u>Jus</u><br>" Residence-Street No. <u>2111</u> Mittylew City <u>Juscian Street</u><br>Single <u>Juscian City</u> <u>Juscian State</u><br><u>Name of Father</u> <u>Europent</u> <del>Farley</del><br>Maiden name of Mother <u>Blauche</u> <u>Backer</u><br>Date of this marriage <u>June</u> <u>17</u> <u>1931</u><br>Place of this marriage <u>Marcine</u> <u>Juscian</u><br>Name and tile of person<br>Performing this marriage <u>Alphan Marcine</u> <u>Municar</u><br>His address. <u>3265</u> <u>Jank</u> <u>Marcine</u> <u>Juscian</u><br><u>Name</u> <u>Marcine</u> <u>Juscian</u><br><u>Marcine</u> <u>Marcine</u> <u>Juscian</u><br><u>Marcine</u> <u>Marcine</u> <u>Juscian</u><br><u>Marcine</u> <u>Marcine</u> <u>Juscian</u><br><u>Municar</u><br><u>Mines</u> <u>Marcine</u> <u>Juscian</u>  | (Attained)  |
| " Residence-Street No. 2111 Millew City Sudawayolis<br>Single Single Single Ist, 2nd or ord Trinst<br>Name of Father Element Franky<br>Maiden name of Mother Blanche Beken<br>Date of this marriage funce 17 1931<br>Place of this marriage And in a constrained by Sud<br>Name and tile of person<br>Performing this marriage Alexander of Sudawayolis<br>His address. 326 S. Jank Market Market Sudawayolis<br>Witness Name Interpret Systems  | " occupation  |
| Single<br>Widow<br>Divorced<br>Name of Father<br>Date of this marriage<br>Place of this marriage<br>Name and title of person<br>Performing this marriage<br>His address. 32.6.5<br>Marrie Marriage<br>Witness  | " Birthplace-City Successful State Such   |
| Witness Name Manue   | " Residence-Street No. 2111 Willew City Andrauglis  |
| Maiden name of Mother Blauche Beken<br>Date of this marriage funce 17 1931<br>Place of this marriage main and title of person<br>Performing this marriage application of the main of th  | Widow Surego Ist, 2nd or ord Marst  |
| Date of this marriage funce 17 1931<br>Place of this marriage free for the second state of the second state  | Name of Father Current Harley   |
| Place of this marriage military of Such<br>Name and title of person<br>Performing this marriage approximation of the military<br>His address. 326 S. Mark and Markan Andrew Splits<br>Witness Name mogane Lyons  | Maiden name of Mother Blauche Blacker   |
| Name and title of person<br>Performing this marriage<br>His address 326 S Jank are find any plice<br>Witness Name mogene Lyons   | Date of this marriage   |
| Performing this mairiage alf miles for the find of the second sec   |   |
| Witness { Name Imogan Lyons  | Performing this marriage all the                                  |
| Witness AAAAAA   | His address 3265 17 and arre funder will be   |
| Witness AAAAAA   |   |
| Address Address  | Witness A 101   |
|  | Address Address Address   |



146

|       | Marriag     | e Record    | for Board    | of Health           |
|-------|-------------|-------------|--------------|---------------------|
| To Be | Returned by | Minister or | Other Person | Performing Ceremony |

and Groom's name His age ... а color и occupation 0 Birthplace-City .... State. 4 " Residence-Street No./00 City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother UC. Bride's name. 6 color While 4 occupation lacher 4 Birthplace-Citve AIARI u State Residence-Street No. 2607 Au и Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. rune Date of this marriage. Place of this marriage 394 Name and title of person Performing this marriage His address and Name Witness 3 21 2 Address

LEVEY PRINTING CO., IND'PLB. 27868 82-80

FILED JUN 27 1930 Stenne B Relation

1462

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony on marion molegand a Tryl. Groom's name Low 74 1 arion His age ..... color... occupation rolom Pr Birthplace State " Residence-Street No Single Widower 1st, 2nd or 3rd Divorced marriage 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 at Maiden name of Mother. 1 Date of this marriage

mand.

The

ð

anal

10

Name

Address 5.0.1

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

His address

Witness

и

4

u

FILED · JUN 23 1930

Glenn B Ralston

1463

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                   |  |  |  |
|---|--|--|--|
| Caul Harrison Calmer and Rubry See Mann   |  |  |  |
| Groom's name Jaul Arrison Galmer  |  |  |  |
| His age 2/  |  |  |  |
| " color white g   |  |  |  |
| " occupation about  |  |  |  |
| " Birthplace-City Jelley Mills State Ind  |  |  |  |
| " Residence-Street No. Jalley Mills City Ind  |  |  |  |
| Single<br>Widawer<br>Divorced lst, 2nd or 3rd<br>marriage   |  |  |  |
| Name of Father Blanchark Onlyne   |  |  |  |
| Maiden name of Mother Lette Mar Scatt   |  |  |  |
| Bride's name Rechty Lee Mann<br>Her age 19  |  |  |  |
| " color while   |  |  |  |
| " occupation the stars the first  |  |  |  |
| " Birthplace-City   |  |  |  |
| " Residence-Street No. 1940 III. New Tota City.   |  |  |  |
| Single<br>Widow [1st, 2nd or 3nd]<br>Divorced [2010]  |  |  |  |
| Name of Father  |  |  |  |
| Maiden name of Mother Blanch M. Claub   |  |  |  |
|   |  |  |  |
| Date of this marriage   |  |  |  |
| Place of this marriage And un a Colus Surf<br>Name and title of person<br>Performing this marriage Colum State Automaty |  |  |  |
| His address Inchanapoles Jud  |  |  |  |
|   |  |  |  |
| Name Blanch Myour 7944 W. Mangar  |  |  |  |
| Witness Address Litta Tari (Show) - Villy Palle S.  |  |  |  |



464

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

tace we and Groom's name. 00 His age " color occupation Birthplace " State " Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name. Her age .... 4 color occupation " 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 Addre



17100

|       | Marriag     | e Record    | for Board    | of Health           |
|-------|-------------|-------------|--------------|---------------------|
| To Be | Returned by | Minister or | Other Person | Performing Ceremony |

and aul Villance ich Groom's name. His age ..... " color... mitrich " occupation ... Birthplace-City. ч unalis State " Residence-Street N Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name an Her age. color " " occupation " Birthplace-City projection State ч Residence-Street No Single<sup>L</sup> 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 24



466

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and ula Groom's name His age .... " color in occupation as fi 4 " Birthplace-City State " Residence-Street No. City Single Widower 1st. 2nd or 3r Divorced marriage Name of Father Maiden name of Mother Bride's name Her age 20 color. 4 occupation " Birthplace-City. State ч Residence-Street No. -City Single 2 1st, 2nd or 3rd Widow Divorced marriage 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 Minister or Other Person Performing Ceremony 1 m. and Groom's name His age .... " color. occupation 4 Birthplace-City. State 6 " Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mothe 0 R Bride's name Her age ... 4 color occupation Birthplace 4 - City State 61 4 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

1467



1468

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

and 81 Groom's name His age 4 color 11 a 4 occupation Birthplace " State " Residence o City Single -Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age color occupation " Birthplace ц 0 " Residence--Street N Single 1st, 2nd marriag 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 LEVEY PRINTING CO., INDIPLS. 27868 82-80



1469

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

ine Renus Wickle nollie Groom's name nus His age color abarer winner occupation Birthplace-City. 0 State. ack Residence ĸ City. Single Widower Divorced 1st, 2nd or 3rd marriage Name of Father io Maiden name of Mother. 1.8 Bride's name Her age .. 0 " color... occupation aun Birthplace 1 8 4 Residence har " -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 nicelin Address 6



1410

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |  |
|---|--|--|--|
| abit anos Boneserally wells branlais  |  |  |  |
| Groom's name thickard allen allones   |  |  |  |
| His age 2/  |  |  |  |
| " color.ed  |  |  |  |
| " occupation Conten   |  |  |  |
| " Birthplace-City / Kendelcom State Jup   |  |  |  |
| " Residence-Street No. 4/9 W. W almut City Inoppo   |  |  |  |
| Single<br>Widower<br>Divorced   |  |  |  |
| Name of Father Fichard allen alues  |  |  |  |
| Maiden name of Mother Anna their Carhin   |  |  |  |
| Bride's name I sona Shicks  |  |  |  |
|   |  |  |  |
| Her age. / 9  |  |  |  |
| " color ed  |  |  |  |
| " occupation  |  |  |  |
| " Birthplace-CityStateState   |  |  |  |
| " Residence-Street No. 57.8 1 West City Sarpho  |  |  |  |
| Single<br>Widow<br>Divorced   |  |  |  |
| Name of Father William Dhicks   |  |  |  |
| Maiden name of Mother   |  |  |  |
| Date of this marriage.  |  |  |  |
| Place of this marriage weather after a study<br>Name and title of person<br>Performing this marriage  |  |  |  |
| His address Du chroni Jul   |  |  |  |
| Witness Name David Battle - 215 W. North In Jugar<br>Address Sara E Stunter 2445 Northwestern and     |  |  |  |
| Return this Report to County Clark with License and Cartificate                                       |  |  |  |



1411

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony        |  |  |  |
|--|--|--|--|
| Danuel Servis and Editta Barlow  |  |  |  |
| Groom's name Vanel Dewis   |  |  |  |
| His age 42   |  |  |  |
| " coloread   |  |  |  |
| " occupation Dee Mary  |  |  |  |
| " Birthplace-City Lowsang State Mo   |  |  |  |
| " Residence-Street No. 1218 Vanderman the City Indraumpoles Ind  |  |  |  |
| Single<br>Widower<br>Divorced<br>Name of Father Stelling Service   |  |  |  |
|  |  |  |  |
| Maiden name of Mother Tuelle Hound   |  |  |  |
| Bride's name Edittle Barlow  |  |  |  |
| Her age. 34  |  |  |  |
| " color 22 g   |  |  |  |
| " occupation Downster  |  |  |  |
| " Birthplace-City Hart county State My   |  |  |  |
| " Residence-Street No. 1212 Daudenman City   |  |  |  |
| Single<br>Widow<br>Divoreed  |  |  |  |
| Name of Father 10 Mansfredd  |  |  |  |
| Maiden name of Mother Life M Dowyal  |  |  |  |
| Date of this marriage Junul 18 1931  |  |  |  |
| Place of this marriage Sudamapalis Sud<br>Name and title of person<br>Performing this marriage Ann & Manuary |  |  |  |
| His address Sudianafoli Sud  |  |  |  |
| Name   |  |  |  |
| Witness Address  |  |  |  |
|  |  |  |  |

C



1712

| Marriage Record for Board of Health                            |  |  |  |  |
|--|--|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony |  |  |  |  |
| Alos M trageral yould one rolling togot manualle               |  |  |  |  |
| Groom's name (arman Cobert Miller                              |  |  |  |  |
| His age 26   |  |  |  |  |
| " color white  |  |  |  |  |
| " occupation In pursua   |  |  |  |  |
| " Birthplace-City & assaine State State Ohio                   |  |  |  |  |
| " Residence-Street No. 3/55 6 allega City Judpla               |  |  |  |  |
| Single<br>Widower<br>Divorced                                  |  |  |  |  |
| Name of Father   |  |  |  |  |
| Maiden name of Mother Emily Juine Starbau                      |  |  |  |  |
|  |  |  |  |  |
| Bride's name Mary Maryouh Me Cabe                              |  |  |  |  |
| Her age 25   |  |  |  |  |
| " color_softile  |  |  |  |  |
| " occupation sale say  |  |  |  |  |
| " Birthplace-CityState   |  |  |  |  |
| " Residence-Street No. 3720 7. Clean City Inpla                |  |  |  |  |
| Single-<br>Widow<br>Divorced                                   |  |  |  |  |
| Name of Father add plo deydensteiles                           |  |  |  |  |
| Maiden name of Mother  |  |  |  |  |
| Date of this marriage.   |  |  |  |  |
| Place of this marriage   |  |  |  |  |
| His address Tudumapplu Jud                                     |  |  |  |  |
| Witness Name Address Q. Seiden Studie 240 3 Gard -             |  |  |  |  |
|  |  |  |  |  |

FILED JUN 23 1930 Stenn B Relation

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |  |  |  |  |
|--|--|--|--|--|
| Harold Ednin More and Glemine Lucille Stafford   |  |  |  |  |
| Groom's name Harbled Edwine Morse  |  |  |  |  |
| His age  |  |  |  |  |
| " color "White   |  |  |  |  |
| " occupation Jack maker  |  |  |  |  |
| " Birthplace-City Fairhaven State Mass   |  |  |  |  |
| " Residence-Street No. 15.2.2. / Heatt City Indianapolis   |  |  |  |  |
| Single<br>Widower<br>Divorced Single [1st, 2nd or 3rd<br>marriage]   |  |  |  |  |
| Name of Father Eduin Forest Morse  |  |  |  |  |
| Maiden name of Mother Mabel Frageees Brown   |  |  |  |  |
| Bride's name <u>Glennie Lucille &amp; tafford</u>  |  |  |  |  |
| Her age  |  |  |  |  |
| " color  |  |  |  |  |
| " occupation   |  |  |  |  |
| " Birthplace-City Clinton County State Indiana   |  |  |  |  |
| " Residence-Street No. 1/12. Westbrook City Indennefalis   |  |  |  |  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>marriage   |  |  |  |  |
| Name of Father Walliams Raymond & tafford  |  |  |  |  |
| Maiden name of Mother Ruth Ellen Marshall  |  |  |  |  |
| Date of this marriage 9442 18 - 1931   |  |  |  |  |
| Place of this marriage Second Friends Church Indianapolic Fred   |  |  |  |  |
| Name and title of person Organization of the second |  |  |  |  |
| His address 1814 Jambert Steel   |  |  |  |  |
| Capiel between best fight Activity and a second  |  |  |  |  |
| Name My & Mrs. Ernest & furmickast   |  |  |  |  |
| Witness Address 545 7. Chester ave Indiangelis, Ind.   |  |  |  |  |
|  |  |  |  |  |

LEVER PRINTING CO., INDIPLE. 27868 \$2-80

FILED JUN 25 1930

14/4

| Marriage Record for Board of Health   |       |  |  |  |
|---|-------|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony  |       |  |  |  |
| malily invalse one flatethe would   |       |  |  |  |
| Groom's name homes Mitchell   |       |  |  |  |
| His age 21  |       |  |  |  |
| " color.ed  |       |  |  |  |
| " occupation Truck Driver   |       |  |  |  |
| " Birthplace-City   |       |  |  |  |
| " Residence-Street No. 2439 Martingal City July   |       |  |  |  |
| Single { 1st, 2ñd-or 3rd_ }   |       |  |  |  |
| Divorced   marriage   |       |  |  |  |
| Name of Father Meter Meterlel   |       |  |  |  |
| Maiden name of Mother ale Suttan  |       |  |  |  |
| Bride's name Marnie Il ilson  |       |  |  |  |
| Her age   |       |  |  |  |
| " color A   |       |  |  |  |
| " occupation  |       |  |  |  |
| " Birthplace-City Ordpla State Ind  |       |  |  |  |
| " Residence-Street No. 24 40 Palston City Scope   |       |  |  |  |
| Single<br>Widew<br>Divorced 1st, 2nd or 9rd<br>marriage   |       |  |  |  |
| Name of Father Fring Willeger   |       |  |  |  |
| Maiden name of Mother Mahalia Springfield   |       |  |  |  |
| Que 18-1921   |       |  |  |  |
| Date of this marriage   |       |  |  |  |
| Place of this marriage Deschama abortion Sull<br>Name and title of person<br>Performing this marriage About & Mannung A | ••••• |  |  |  |
| His address Judenuchalis Jud  |       |  |  |  |
|   |       |  |  |  |
| Name Acter Gumon 3439 Master lag  |       |  |  |  |
| Witness Address James Ottomm - 403 Denter A   | ~     |  |  |  |
| f   |       |  |  |  |

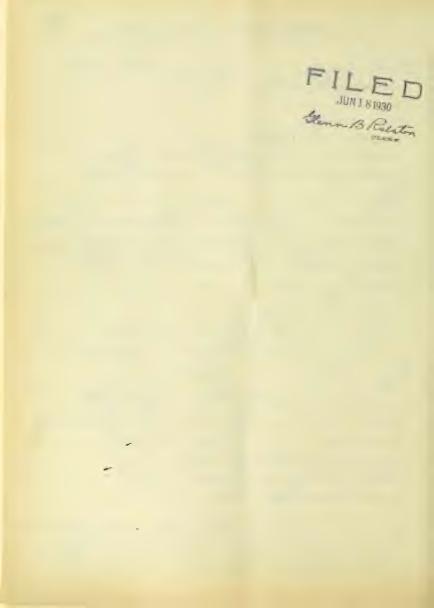
FILED JUN 23 1930 Menn B Relation

1475 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony lliaus Shiven lary ouisa and N Groom's name ... aus T.N His age 23 color " barro occupation. 9.1 4 City State. Birthplace-City " 11.0 " Residence-Street No. Dagar City HOIL Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father nood Ona Maiden name of Mother. 99.410 0 ourse Hal an Bride's name Her age ..... 20 lita A color..... u occupation Birthplace-City. State Residence-Street No.4420 N. Penn Single Widow 1st, 2nd or 3rd marriage Divorced Jann Name of Father de Maiden name of Mother. 0 00 6 18 1931 Date of this marriage. 01110 Place of this marriage Performing this marriage His address. Name Witness anap nde Address. 45



111

| Service Street No. 4/4 & 28% City State  |
|--|
| His age 5-2<br>" color white<br>" occupation Labor<br>" Birthplace-City Locknittle State Ind<br>" Residence-Street No. 41.4 & 28th City Ind<br>Single-<br>Single-<br>Single-<br>Single-<br>State Ind<br>1 th, 2nd or 3rd |
| " color white<br>" occupation & afor<br>" Birthplace-City & andraicle State Surf<br>" Residence-Street No. 4/14 & 28 % City Surples<br>Single-<br>Nicover } & the 2nd or 3rd   |
| " occupation Labor<br>" Birthplace-City Aschnittle State Ind<br>" Residence-Street No. 414 & 28 % City Independent<br>Single-<br>Single-<br>Nicover 2 1 the 2nd or 3rd   |
| " Birthplace-City. A schwiche State Such<br>"Residence-Street No. 4/4 & 28 & City. Supples<br>Single-<br>Widewer 2 2 1st, 2nd or 3rd   |
| " Residence-Street No. 4/14 & 28 % City Dupple   |
| Single-<br>Widower } 2 (1st, 2nd or 3rd }  |
| Widower }  |
| Divorced )   |
| New Station (11100 - a) Advance (1010)   |
| Name of Father William Anomes Sayne  |
| Maiden name of Mother A ebeccas Meboras  |
| Bride's name Troa I sabelle Aeller   |
| Her age 37   |
| " color whit   |
| " occupation I fance Ruper   |
| " Birthplace-City Westprit State Sud   |
| " Residence-Street No. 357 8 May City Inaply   |
| Single<br>Widow<br>Divorced  |
| Name of Father flillean fichtt   |
| Maiden name of Mother  |
| Date of this marriage  |
| Place of this marriage Surdianue policies Surd<br>Name and title of person<br>Performing this marriage golum & Manning &   |
| His address Dudun opins Sul  |
| Witness Name Cloner Branch- 1102 Souther Studie  |
| Address Nation of Constants Clark with Lines and California  |



| To Be Returned by Minister or Other Person Performing Ceremony  |
|---|
|   |
| and   |
| Groom's name Deujanin A. Nader  |
| His age   |
| " colorWhite  |
| " occupation Parmer   |
| " Birthplace-City Indianapolis State Indiana  |
| " Residence-Street No. ? City McCordsville Su   |
| Single<br>Widower<br>Divorced Divorced Ist, 2nd or 3rd  |
| Name of Father Thilip Nader   |
| Maiden name of Mother Augusta Hoff man  |
| Bride's name Emma Marie Bechert   |
| Her age 3.9   |
| " color_ White  |
| " occupation Deacher  |
| " Birthplace-City Indian apolis State Indiana f   |
| " Residence-Street No. 6 2.5 N. Filey becity Indianapolio   |
| Single<br>Widow<br>Divorced   |
| Name of Father Indinand W. Dechert  |
| Maiden name of Mother Gulia Hickey  |
| Date of this marriage   |
| Place of this marriage Our Rady of Lourses Declory<br>Name and title of person Te. mi Lace W. Lyous, Castor |
| His address 5317 E. Washington Sr Indpls  |
| and address   |
| None Joseph Becherd- Marie Bechert  |
| Witness Name Juseph Dechere Marie Dechere   |
|   |

8.8

1 1/ -

Return this Report to County Clerk with License and Certificate

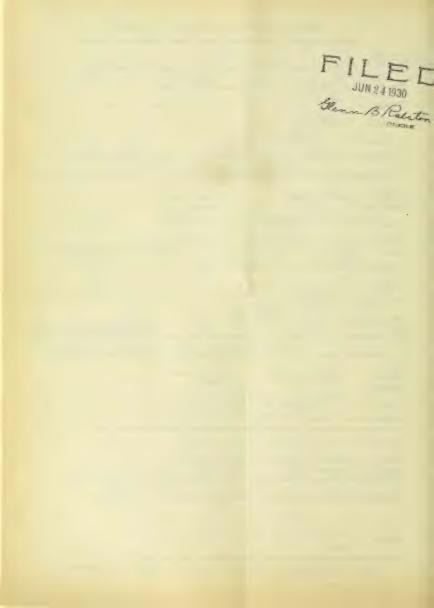


1-110

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

| arthur Thomas Smithand Gen   | ena a Bailey         |
|--|----------------------|
| Groom's name arthur Thana In   | itt                  |
| His age 21   |                      |
| " color While  |                      |
| " occupation Labor   |                      |
| " Birthplace-City Indianapolis   | State Indiana        |
| " Residence-Street No. 540 arusela   | City Indianafal      |
| Single<br>Widewer<br>Divorced<br>Name of Father Richard Ami  | · 3rd ]              |
| Maiden name of Mother Mattie Mass  | ue                   |
| Bride's name Lenena a Bailey<br>Her age 13   |                      |
| " color White<br>" occupation Heansellefer   | A-1-                 |
| " Birthplace-City Indianglalis<br>" Residence-Street No. 540 and 198   | State Infrance falls |
| Single<br>Widows<br>Divorced Jungle [1st, 2nd or<br>marriage   | . /                  |
| Name of Father gearge W Bailey   |                      |
| Maiden name of Mother (Mary Jans   | <u>U</u>             |
| Date of this marriage June 19 193  | /                    |
| Place of this marriage for the standard Name and title of person Performing this marriage for the standard th | her minister         |
| His address 3537 w Meligan   | At Bity              |
| Witness Name Leartyle UN BO  | ilez                 |
|  |                      |

l



11/1

| To Be Returned by Minister or Other Person Performing Ceremony |
|--|
| Groom's name Bycom rickard Switz                               |
| His age 25   |
| " color  |
| " occupation from and selection                                |
| " Birthplace-City neuwood State neuro                          |
| " Residence-Street No. 1417 Vorth dank City.                   |
| Single<br>Widower<br>Divorced                                  |
| Name of Father Seo. Swith                                      |
| Maiden name of Mother Alaret Alaret                            |
| Bride's name Lawa On the party                                 |
| Her age 2.0-   |
| " color. <u>Delait</u>   |
| " occupation March   |
| " Birthplace-CityStateState                                    |
| " Residence-Street No City                                     |
| Single<br>Widow [1st, 2nd or 3rd<br>marriage ]                 |
| Name of Father homes J. Jackson                                |
| Maiden name of Mother  |
| Date of this marriage  |
| Place of this marriage   |
| His address  |
|  |
| Name f. M. Pannoch.  |
| Witness Address Address  |

Marriage Record for Board of Health

Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., IND'PLS. 27868 82-80

FILED JUN 22 1930 Glenn B Relatin

110-

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |  |  |
|---|--|--|--|--|
|   |  |  |  |  |
| Richard Jolhert and Della Brown   |  |  |  |  |
| Groom's name Lichard Jolliert   |  |  |  |  |
| His age 7 D U   |  |  |  |  |
| " color Brownskin dark  |  |  |  |  |
| " occupation Jabor  |  |  |  |  |
| " Birthplace-City Frankfort State Kentucky  |  |  |  |  |
| " Residence-Street No. 1521 Ne Vestern Grecity Sulling here   |  |  |  |  |
| Single<br>Widower<br>Divorced 2nd Marriage  |  |  |  |  |
| Name of Father Richard Tolbert  |  |  |  |  |
| Maiden name of Mother Sophia Scott  |  |  |  |  |
| Bride's name Della Brown  |  |  |  |  |
| Her age 55  |  |  |  |  |
| " color Brownskin, light  |  |  |  |  |
| " occupation housewife  |  |  |  |  |
| " Birthplace-City Indianapolic State Indiana  |  |  |  |  |
| " Residence-Street No. 1525 N. Heater City Industry   |  |  |  |  |
| Single<br>Widow<br>Divorced 2 2 nd marriage 2 nd marriage   |  |  |  |  |
| Name of Father Edward Carter  |  |  |  |  |
| Maiden name of Mother Elign Lane  |  |  |  |  |
| 15 16.81  |  |  |  |  |
| Date of this marriage   |  |  |  |  |
| Place of this marriage<br>Name and title of person<br>Name and title of person                        |  |  |  |  |
| Performing this marriage 700, 71. 70. 6 Amunds  |  |  |  |  |
| His address 42) 21, 17 22 24  |  |  |  |  |
|   |  |  |  |  |
| Witness { Name  |  |  |  |  |
| Address   |  |  |  |  |

LEVER PRINTING CO., INDIPLE. 27868 82-80



Kenn B Relation

.

1101

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |  |  |  |  |
|--|--|--|--|--|
| Clyde Ernest andrews and Cora Jonise Stierwalt   |  |  |  |  |
| Groom's name Cly de Emest Andrews  |  |  |  |  |
| His age Livent, two  |  |  |  |  |
| " color. Arhite  |  |  |  |  |
| " occupation dive stock Receiver   |  |  |  |  |
| " Birthplace-City Indianafolis State Ind   |  |  |  |  |
| " Residence-Street No. 1743 W. Moris City Indianapolis Ind   |  |  |  |  |
| Single Midower Ist, and or and Ist, and or and International Internation |  |  |  |  |
| Name of Father John andrews  |  |  |  |  |
| Maiden name of Mother Matilda Jell   |  |  |  |  |
| Bride's name Cora Louise Strenwalt   |  |  |  |  |
| Her age Twenty two   |  |  |  |  |
| " color  |  |  |  |  |
| " occupation Saleslady   |  |  |  |  |
| " Birthplace-City_ Indianafoli's State Indiana   |  |  |  |  |
| " Residence-Street No. 1122 Recine & City pudianaputis had   |  |  |  |  |
| Single Single [1st, 2nd or Brd] 1 est Marriage   |  |  |  |  |
| Name of Father Chi Franklin Stiewalt   |  |  |  |  |
| Maiden name of Mother Source anuclia Schaub  |  |  |  |  |
| Date of this marriage June 19th 1931   |  |  |  |  |
| R Qui i i Q I  |  |  |  |  |
| Place of this marriage Puckan age The duan affording fund.<br>Name and title of person<br>Performing this marriage Rev. George D Billeisur   |  |  |  |  |
| His address 3134 M. New Jusey At   |  |  |  |  |
| Gudianafoli's Aud  |  |  |  |  |
| Name harry Sterwalt VSWBilleisan (   |  |  |  |  |
| Witness Address 124 Veinner St. 3/34 Mary Jersey St.   |  |  |  |  |

FILED JUN 23 1930

Glenn B Ralston CLERK

1405

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony              |  |  |  |  |
|--|--|--|--|--|
| golul Henry Hanevell and Daisen Sittemouth   |  |  |  |  |
| Groom's name John Henry Joanach  |  |  |  |  |
| His age 3/   |  |  |  |  |
| " color sol  |  |  |  |  |
| " occupation forces  |  |  |  |  |
| " Birthplace-City buthed State y   |  |  |  |  |
| " Residence-Street No. 965 6 dynamt City Deraps  |  |  |  |  |
| Single<br>Widower<br>Divorced Ist, 2nd or 3rd<br>marriage  |  |  |  |  |
| Name of Father John Many & Koncura   |  |  |  |  |
| Maiden name of Mother Lula Stayden   |  |  |  |  |
| Bride's name Daisey Jettsworth   |  |  |  |  |
| Her age 25   |  |  |  |  |
| " color end  |  |  |  |  |
| " occupation Alberto as Aringen  |  |  |  |  |
| " Birthplace-City. Offiching State My  |  |  |  |  |
| " Residence-Street Nog 5 & Colomant City Dugos   |  |  |  |  |
| Single<br>Widow<br>Divorced  |  |  |  |  |
| Name of Father Charles Litteworth  |  |  |  |  |
| Maiden name of Mother Mary alexander   |  |  |  |  |
| Date of this marriage  |  |  |  |  |
| Place of this marriage Indum Bhoffs Ind<br>Name and title of person<br>Performing this marriage for the Manuary of |  |  |  |  |
| His address Inchevel afastic Dud D   |  |  |  |  |
|  |  |  |  |  |
| Witness { Name   |  |  |  |  |
| Address  |  |  |  |  |

LEVET PAINTING CO., IND'PLS. 27868 82-80

FILED JUN 23 1930 Glenn B Relation

THERE

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony               |  |  |  |  |
|---|--|--|--|--|
| Clause Juinty and Hazel Powel   |  |  |  |  |
| Groom's name Claube Spicely   |  |  |  |  |
| His age   |  |  |  |  |
| " color   |  |  |  |  |
| " occupation Book Keepe   |  |  |  |  |
| " Birthplace-City Berufield State   |  |  |  |  |
| " Residence-Street No City Bloomfields  |  |  |  |  |
| Single 197 [1st, 2nd or 3rd<br>Divorced] 1st, 2nd or 3rd  |  |  |  |  |
| Name of Father Ori Suite  |  |  |  |  |
| Maiden name of Mother Fuler Cours   |  |  |  |  |
| Bride's name Hazel Cowel  |  |  |  |  |
| Her age   |  |  |  |  |
| " color Wheth   |  |  |  |  |
| " occupation Telephone operator   |  |  |  |  |
| " Birthplace-City Rearch Fink State Art   |  |  |  |  |
| " Residence-Street No. 1415 Park City Scherebyle  |  |  |  |  |
| Single Ist, 2nd or 3rd / M  |  |  |  |  |
| Name of Father Inerett L. Cowelf  |  |  |  |  |
| Maiden name of Mother Olicia allhigh  |  |  |  |  |
| Date of this marriage   |  |  |  |  |
| Place of this marriage And acceptor<br>Name and title of person<br>Performing this marriage Rev. Marga Statesburger |  |  |  |  |
| His address Induanapoleis.  |  |  |  |  |
| Witness Name Morros Plart E. 7 trur<br>Address 67.5 E. 17 The St. Indian apoend, Indi                               |  |  |  |  |

LEVEY PRINTING CO., INDIFLS. 27868 82-80

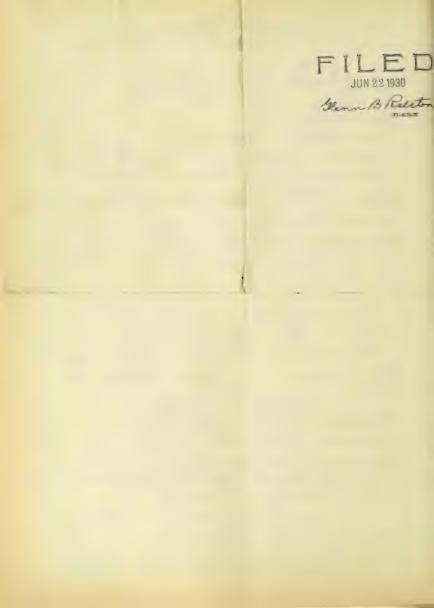
FILED Glenn B Relation

CTL, 101. 8

(407

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

and Groom's name His age ..... 4 color White " 4 occupation Birthplace 4 toto 06 17. Residence-Street 1 0 " Single Widower 1st, 2nd or 3rd Divorced marriage. Name of Father Maiden name of Mother. Bride's name Her age. color white 4 4 occupation 4 Birthplace 4 Residence-Street No. ac 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 in Co. Name Witness Address



1100

| Marriage Record for Board of Health<br>To Be Returned by Minister'of Other Person Performing Ceremony  |
|--|
| James & Van meterand Margaret June Fang dor  |
| Groom's name James & Vair Mages  |
| His age  |
| " colorWhile   |
| " occupation Brick Marson  |
| " Birthplace-City DT Jours State MA  |
| " Residence-Street No. 1010. U. Mers Beser City Auchanapolis.  |
| Single<br>Widower<br>Divorced Ucvarced (Dst, 2nd or 3rd Second   |
| Name of Father Jan Meles   |
| Maiden name of Mother Heeta Harrington   |
| Bride's name Margaret June Fangelon  |
| Her age 2.2  |
| " color_ Whele   |
| " occupation Elevators Operator  |
| " Birthplace-City Part Starty State Michigan   |
| " Residence-Street No 10/0 M. Hew Juse gity freehawapours  |
| Where hurransis ( 1955, 2nd or 3rd ) Second  |
| Name of Father fan gdon,   |
| Maiden name of Mather Mary Smith   |
| Date of this marriage  |
| Place of this marriage Andrama jet his fuchaing<br>Name and title of person Rev. Cellbert Spacelefring |
| His address 723 Fletcher aby,  |
| Andranapolis decharg   |
| Witness Name IAro James Van Meter  |
| Address fo 10 Manu Jerang Str.   |

LEVEY PRINTING CO., IND'PLS. 27868 82-80



1 1000

| Marriage Record for Board of Health  |  |  |  |  |  |
|--|--|--|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony                 |  |  |  |  |  |
| Paul Boown and Junel n. White  |  |  |  |  |  |
| Groom's name Paul & Boarn  |  |  |  |  |  |
| His age 10   |  |  |  |  |  |
| " color_ White   |  |  |  |  |  |
| " occupation for Actining  |  |  |  |  |  |
| " Birthplace City alamo I state Indiana  |  |  |  |  |  |
| " Residence Street No. 675 6 6 getter City Indianofolis                        |  |  |  |  |  |
| Single<br>Widower<br>Divorced<br>Marriage                                      |  |  |  |  |  |
| Name of Father Allen   |  |  |  |  |  |
| Maiden name of Mother & Nancy Gerris   |  |  |  |  |  |
| Bride's name Junel N. White  |  |  |  |  |  |
| Her age <u><math>\gamma_0</math></u>   |  |  |  |  |  |
| " color White  |  |  |  |  |  |
| " occupation Waitrus   |  |  |  |  |  |
| " Birthplace-City Nincennes Ind State  |  |  |  |  |  |
| " Residence-Street No. 6 15 S. Edgehill City Indian Arlis                      |  |  |  |  |  |
| Single<br>Widow<br>Dixored   |  |  |  |  |  |
| Name of Father M= 6. White   |  |  |  |  |  |
| Maiden name of Mother Rebecca Huffer   |  |  |  |  |  |
| Date of this marriage June 70, 1931  |  |  |  |  |  |
| Place of this marriage Grace Lutheran Church                                   |  |  |  |  |  |
| Name and title of person<br>Performing this marriage Rev. Fremerkunt, Minister |  |  |  |  |  |
| His address 1436 Berning and   |  |  |  |  |  |
| Millie White   |  |  |  |  |  |
| Witness Address 615 S. Edgehile & Indianapolis, Ind.                           |  |  |  |  |  |
| Return this Report to County Clerk with License and Certificate                |  |  |  |  |  |

LEVEY PAINTING CO., IND'PLS. 27868 52-80



1401

|      | Marriag       | e Record    | for B   | oard   | of Healt   | h        |
|------|---------------|-------------|---------|--------|------------|----------|
| To B | e Returned by | Minister on | r Other | Person | Performing | Ceremony |

Harved E. P. the Wa and Groom's name His age. 4 color. 4 occupation 4 Birthplace State no Residence-Street No. 4 City Single Widowes 1 2nd or 3r Divorced marriage Name of Father Maiden name of Mother Mar Bride's name Her age. " color 4 occupation en D, 4 Birthplace-City. State R.4 120x4 Residence-Street No 4 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

LEVEY PRINTING CO., IND'PLS. 27868 82-80



1400

|    |    | Marriag     | e Record    | for Board    | of Health           |
|----|----|-------------|-------------|--------------|---------------------|
| To | Be | Returned by | Minister or | Other Person | Performing Ceremony |

and Groom's name His age. 4 color occupation " Birthplace-City " State Residence " -Street No City Single Widower 1st. 2nd or Srd Divorced marriage Name of Father a Maiden name of Mother Bride's name 200 Her age. 4 color 4 occupation " Birthplacean State и Residence--Street N 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

LEVEY PRINTING CO., INDIPLS. 27868 82-80



1701

| Welphine Lee Chance and Rich E. While                                   |  |  |  |  |
|---|--|--|--|--|
| Groom's name Welphig Jee Chance   |  |  |  |  |
| His age 29  |  |  |  |  |
| " color_ White  |  |  |  |  |
| " occupation cleak.   |  |  |  |  |
| " Birthplace City Inchange vis, State Inchang                           |  |  |  |  |
| " Residence-Street No. 365 Lito drew City chicken apolio                |  |  |  |  |
| Single<br>Widower<br>Divorced Helevarced Ist, 2nd or 3rd<br>marriage    |  |  |  |  |
| Name of Father Ja W. Chauce   |  |  |  |  |
| Maiden name of Mother Mothe Turner                                      |  |  |  |  |
| Bride's name Ruth Ernesting white                                       |  |  |  |  |
| Her age 2.2   |  |  |  |  |
| " color While   |  |  |  |  |
| " occupation operator   |  |  |  |  |
| " Birthplace-City Jew Custle State Chickang                             |  |  |  |  |
| " Residence-Street No/5.21 E. Michiga Sity Judicence factor             |  |  |  |  |
| Single<br>Widow<br>Divorced Jart [1st, 2nd or 3rd<br>marriage Jard Jard |  |  |  |  |
| Name of Father 6. Whele   |  |  |  |  |
| Maiden name of Mother anna Mounticeg.                                   |  |  |  |  |
| Date of this marriage June 20th 1931                                    |  |  |  |  |
| Place of this marriage fleb. albert Spacedare                           |  |  |  |  |
| His address of malanup thes, alude                                      |  |  |  |  |
|   |  |  |  |  |
| Name L. M. Chance   |  |  |  |  |
| Witness Address 625 Edgeheld Prad.                                      |  |  |  |  |

Marriage Record for Board of Health

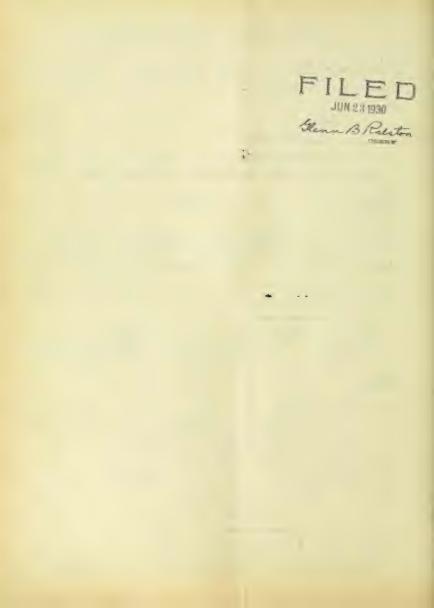
Return this Report to County Clerk with License and Certificate

LEVEN PRINTING CO., INDIPLS. 27868 82-80

FILET JUN 23 1930 Slenn B Reds

1790

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |  |
|---|--|--|--|
| Repford I Daubenningand alma & moninger   |  |  |  |
| Groom's name Rexford 7. Daulerine   |  |  |  |
| His age 21  |  |  |  |
| " color Color   |  |  |  |
| " occupation Justicity  |  |  |  |
| " Birthplace-City Cold write State O.   |  |  |  |
| " Residence-Street No. 2325 h. La Jelle City Ind fle, not   |  |  |  |
| Single<br>Widower<br>Diversed   |  |  |  |
| Name of Father 9.77.  |  |  |  |
| Maiden name of Mother Ethel a. Freidline  |  |  |  |
| Bride's name alma D. Moninger   |  |  |  |
| Her age 21  |  |  |  |
| " colorUlite  |  |  |  |
| " occupation <u>nunsicus</u>  |  |  |  |
| " Birthplace-City. Ind fee State State  |  |  |  |
| " Residence-Street No. 330 Le Wayle & City Julife Ind   |  |  |  |
| Single<br>Widow<br>Di <del>vorced</del> 1st, 2 <del>nd or 3rd</del><br>marriage                       |  |  |  |
| Name of Father  |  |  |  |
| Maiden name of Mother Clara Lang  |  |  |  |
| Date of this marriage. June 20, 1931  |  |  |  |
| Place of this marriage that ps, And<br>Name and title of person Rev. 7. R. Daries                     |  |  |  |
| His address 3618 Jul  |  |  |  |
| Name finance R. Euronnigh   |  |  |  |
| Witness Address 330 b. hape the.  |  |  |  |



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

| and  |                             |                    |  |  |
|--|-----------------------------|--------------------|--|--|
| Groom's name   |                             |                    |  |  |
| His age  |                             |                    |  |  |
| " color  |                             |                    |  |  |
| " occupation   |                             |                    |  |  |
| " Birthplace-City  | State.                      | <u></u>            |  |  |
| " Residence-Street No. 20 9  | City_                       |                    |  |  |
|  | 1st, 2nd or 3rd<br>marriage | }                  |  |  |
| Name of Father   | <u>}</u>                    |                    |  |  |
| Maiden name of Mother  |                             |                    |  |  |
| Bride's name   |                             |                    |  |  |
| Her age  |                             |                    |  |  |
| " color  |                             |                    |  |  |
| " occupation   |                             |                    |  |  |
| " Birthplace-City The Contractor State State                                   |                             |                    |  |  |
| " Residence-Street No. / Prove Charles   | City                        | Mar and a constant |  |  |
| Single<br>Widow<br>Divorced  | 1st, 2nd or 3rd<br>marriage |                    |  |  |
| Name of Father   | t i kodulati e              |                    |  |  |
| Maiden name of Mother  | 1 1 or had                  | the second second  |  |  |
| Date of this marriage  |                             |                    |  |  |
| Place of this marriage<br>Name and title of person<br>Performing this marriage |                             |                    |  |  |
| His address  |                             |                    |  |  |
|  |                             |                    |  |  |
| Witness { Name   |                             |                    |  |  |

Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., INDIPLS. 27868 \$2-80



1492 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Lina and ion Groom's name. His age. а color u occupation 4 Birthplace State 44 Residence -Street Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father LL Maiden name of Mother Bride's name Her age ... 23 4 color 71 4 occupation " Birthplace-City Guna State 2 ч Residence-Street No. City Single 1st, 2nd or 3rd Widow am marriage Divorced Name of Father Maiden name of Mother. m Date of this marriage in Place of this marriage... Name and title of person Performing this marriage His address. Name. Witness Address

FILED JUN 23 1930

Glenn B Ralston CLERK

Marriage Record for Board of Health 493 To Be Returned by Minister or Other Person Performing Ceremony Aus and ours 21 Groom's name. 2 His age white color nalle occupation 4 Birthplace -City State а Residence--Street No. Single st, 2nd or 3rd Widowe marriage Divorced Name of Father Maiden name of Bride's name VI Her age white color. E les trical worker occupation 4 Birthplace State City Residence " -Street No Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother 1931 Date of this marriage V0 -Place of this marriage Name and title of person Performing this marriage 0 673 His address Name Witness 0 Address

LEVET PRINTING CO., IND'PLS. 27868 82-80

FILED JUN 23 1930 Stenn B Reston

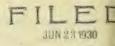
Marriage Record for Board of Health 1494 To Be Returned by Minister or Other Person Performing Ceremony Harold Ray and Fame e Groom's name. Marold Ray His age ...... 27 " color \_\_ 2 lite Cla " occupation .... aun State -Birthplace " Residence-Street No. 1005 n. Ferr .City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 0 Maiden name of Mother Kune Er Bride's name Her age ... 2 hite color 4 occupation Birthplace-City Wayne " State " Residence-1000 71. -Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father 51h Maiden name of Mother. 20, Date of this marriage me Place of this marriage ..... Name and title of person Performing this marriage His address 1 - 1 . 1 Name Witness Address

LEVEY PRINTING CO., INDIPLS. 27868 82-80



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

Elizabeth ilonge Tisler and axin Groom's name His age ... " color. " occupation State " Birthplace 4 Residence A. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother Bride's name Her age..... 4 color occupation и Birthplace state " Residence -Street No. Single Widow 1st. 2nd 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 Indian 108 Address



Glenn B Relate

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

6

FILED JUN 23 1930 Stenm B Redeton

1年代 1497

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

Elango reduces Groom's name NB His age ..... male 4 color. occupation Birthplace State 4 City u Residence-Street No. City Single Vas 1st, 2nd or 3rd Widow Divorced marriage Name of Father ul Maiden name of athenal Oche KILLARAS 6 Bride's name 21 Her age. nhild, 4 color ekelten occupation Un 4 Birthplace - City State З Street No 44 Residence-City IS. Single 1st, 2nd or 3rd Widow marriage Divorced miliget Name of Father Nacherine uri Della Maiden name of Mother in 2 -7 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. un His address hes Name Witness 6004 Address

Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., INDIPLE. 27868 82-80



1470

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

albert altrease and Martley 215 Hartmunn Watman Groom's name....C His age ..... 712 " color ..... armes occupation " Birthplace ina State " Residence--Street No City Single Widower 1st, 2nd or 3rd Divorced marriage alline Name of Father Maiden name of Mother. Bride's name ann 26 Her age color me keeper 10 occupation. Andiana State. 22 Birthplace-City olis R.R. // 08 " Residence-Street No ..... 130x 2 73. City. Single Widow Sina 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



Senn B Ralston 

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

Lerman ( hech and in Fran Γ, theman Groom's name ..... His age 2 color marte entreption) occupation com lo mente State Birthplace " " Residence-Street No 201 City cana Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father. Maiden name of Mother... Bride's name color white " ч occupation Birthplace-City..... u State Pito. " 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 Address



1500

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                       |
|---|
| Rolph Jackson and Dorothy Louise Lamb   |
| His age 25 yrs<br>" color   |
| " occupation for give a state one's   |
| "Residence-Street No. 2/8" Clarffor City Induanapatus<br>Single<br>Widower<br>Divorced Single [1st, 2nd-or-Brd<br>marrisge] |
| Name of Father Moursey Jackson<br>Maiden name of Mother Early Julies Du   |
| Bride's name Dorothy Louise Sauch.  |
| " color Jeached   |
| " Birthplace-City Judianapalis State Jul<br>" Residence-Street No. 627 M Mrst City Julps Jud                                |
| Single<br>Widow<br>Divorced A. J. J. Ist, 2nd or 3rd<br>Divorced J.                     |
| Name of Father Wine Father  |
| Maiden name of Mother Mary alyabeth Taylon  |
| Date of this marriage   |
| Place of this marriage  |
| His address   |
| Name Beatrice Similards + Ularda Land.  |
| Witness Address Indication palies and   |

FILED JUN 28 1930 Gener B Recetor

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Constan 10 and Groom's name His age. " color. ч occupation ч Birthplace State -City " Residence-Street Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother 200 Bride's name Her age. color. occupation. Birthplace-City 4 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 20 Name and title of person Performing this marriage His address. 3 cno Name Witness Address in

LEVEY PRINTING CO., INO'PLA. 27868 82-80



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name 34 His age. color white 4 4 occupation esas " Birthplace-City State " Residence-Street No City Single Widower 1st, 2nd or 9rd Divorced marriage Name of Father Maiden name of Mother Bride's name 201 Her age. color white occupation " Birthplace-City State " Residence-Street No mar 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. 0 His address C Name Witness Address Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., IND'PLS. 27868 \$2-80

FILED JUN 23 1930

Glenn B Ralston

1503

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Chester m. matter and Della m. namera  |
| Groom's name thester m. m. manners maldup  |
| His age 32   |
| " color. 9thite  |
| " occupation Grocery manager   |
| " Birthplace City and Berfort State Judiana  |
| " Residence-Street No. 5023 Kaurena It City Sudianapoly  |
| Single<br>Widower<br>Divorced<br>Divorced<br>A D<br>A D |
| Name of Father Charles Maddux  |
| Maiden name of Mother may herter   |
| Bride's name Alla mc namera  |
| Her age  |
| " color. White   |
| " occupation   |
| " Birthplace-City French Chich State Judiana   |
| " Residence-Street NoCity  |
| Single<br>Widow<br>Divorced     Ist, 2nd or 3rd<br>marriage  |
| Name of Father Alariel Boy ter   |
| Maiden name of Mother Shoka novery work  |
| Date of this marriage June 90, 1931  |
| Place of this marriage Juliany on Schanger Remained Remai   |
| His address 4217 Central ave   |
|  |
| Witness Name E. O. Slurk<br>Address 12 18 94, 80 C U   |
| and the second   |

FILED

JUL 2 7 1931

Benn BR +

120.1

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony         |
|---|
|   |
| Henry C melarty and Ida a Skaggs  |
| Groom's name Henry C McCarty  |
| His age 21 years  |
| " color   |
| " occupation machinist  |
| " Birthplace-City falt Lick State Kentucky  |
| " Residence-Street No. New Castle City Indiana  |
| Single { 1st. 2nd or 3rd }  |
| Widower     Ist, 2nd or 3rd       Divorced  |
| Name of Father Marcon Mc Carty  |
| Maiden name of Mother Mary &. Ressect   |
| Bride's name Ida a Skaggs   |
| Her age 2.4   |
| " color White   |
| " occupation House Keeping  |
| " Birthplace-City Greensburg State Kentucky   |
| " Residence-Street No. 2207 N La Salle City Indianapolis  |
| Single { 1st, 2nd or 3rd }  |
| Divorced  |
| Name of Father Syrus K Skaggs   |
| Maiden name of Mother Mary Carolyn Dobsen   |
| Date of this marriage June 20 - 1931  |
| Place of this marriage Clerk office Court House<br>Name and tile of person Hon, Amiley Chambers Judge Brokato |
| His address   |
| Witness Name Suttyl. Chambers<br>Address # 53 Court House - Sudienofty his                                    |
|   |

LEVEY PRINTING CO., INDIPLS. 27868 82-80



1505

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                    |  |  |
|--|--|--|
| Nawert and Heger   |  |  |
| Groom's name & y Conster Manery  |  |  |
| His age 22   |  |  |
| " color  |  |  |
| " occupation Laboras   |  |  |
| " Birthplace City Pipley Con State and.  |  |  |
| " Residence-Street No. 217 E. Minnisota City Indianspolia  |  |  |
| Single<br>Widower-<br>Divorced   |  |  |
| Name of Father. Nicholaus Vauer  |  |  |
| Maiden name of Mother Minne Wichert  |  |  |
| Bride's name Catherine Elawise M. Hager  |  |  |
| Her age  |  |  |
| " color  |  |  |
| " occupation Dook Reeper   |  |  |
| " Birthplace-City. & udianapolis State and .   |  |  |
| " Residence-Street No. 1214 Union Ol. City. Indianapolia   |  |  |
| Single       Widow       Divorced.         Ist, 2nd or 3rd-<br>marriage  |  |  |
| Name of Father Kobwit Hogve  |  |  |
| Maiden name of Mother North M. Crow  |  |  |
| Date of this marriage. June 2031   |  |  |
| Place of this marriage Subcauspoles and<br>Name and title of person<br>Performing this marriage Rev. Municles Review Lev |  |  |
| His address 15 31 Union Fr.  |  |  |
| Andianapolis Ind.  |  |  |
| Name dasothy Nermann   |  |  |
| Witness Address 2216 minnesta IV   |  |  |

LEVEY PRINTING CO., INDIPLE. 27868 \$2-80



1506

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |  |  |
|---|--|--|
| Ralph R Turson attlien & Basinger   |  |  |
| Groom's name Ralph Raynor Vewson  |  |  |
| His age   |  |  |
| " color   |  |  |
| " occupation Salyman  |  |  |
| " Birthplace-City Column restate Indiana  |  |  |
| " Residence-Street No. Juglian St. VCity  |  |  |
| Single<br>Widower<br>Divorced   |  |  |
| Name of Father Hellix elvel hewson  |  |  |
| Maiden name of Mother Hallie Vellers morgan   |  |  |
| Bride's name / attileen Helen Basinger  |  |  |
| Her age   |  |  |
| " color   |  |  |
| " occupation and a company  |  |  |
| " Birthplace-CityStateState   |  |  |
| " Residence Street No. 73 20 18 City Indrauefoly  |  |  |
| Single<br>Widow<br>Divorced [1st, 2nd or 3rd]   |  |  |
| Name of Father life Dasmall   |  |  |
| Maiden name of Mother. Lew Putgele  |  |  |
| Date of this marriage ** June 2D. 191   |  |  |
| Place of this marriage<br>Name and title of person<br>Performing this marriage                        |  |  |
| His address 5-83 & A Cooling M  |  |  |
|   |  |  |
| Witness Name half & Kurran  |  |  |
| Address Johne W.W. Illians  |  |  |
| Return this Report to County Clerk with License and Certificate                                       |  |  |

LEVEY PRINTING CO., INDIPLE. 27868 82-80

FILED JUN 23 1930

Genn B Paleton

50 /

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

and Groom's name erntarles His age. wenty - lup " color ..... occupation ...... less Birthplace-City " State Residence-Street " City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 011 Maiden name of Mother na Bride's name nau Her age " color beralor let. 4 occupation " Birthplace-City State 21. 6 Residence-Street No. " City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father um Maiden name of Mother ine LI Date of this marriage Place of this marriage. nni Name and title of person Performing this marriage s be sen His address rmann 1 of Honor He Name Witness Address eauspolis she Return this Report to County Clerk with License and Certificate



1508

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |                     |
|---|---------------------|
| alasseig be unvillie  | and Jucille Ragland |
| Groom's name  | · Guerceall         |
| His age 3/  |                     |
| " color white   |                     |
| " occupation Glager   |                     |
| " Birthplace-City Fancy   | Farm State Au       |
| " Residence-Street No. 2238   | Engrandity Propole  |
| Single<br>Widower   | 1st, Snd or 3rd     |
| Divorced Mark   | (marriage           |
| $\langle \mathcal{P} \rangle$   | 1 Viana/            |
| Maiden name of Mother   | a soon              |
| Bride's name Lucille  | Ragland             |
| Her age 23  | - /                 |
| " color exhite  |                     |
| " occupation Supervisor   | of Liling Cupt      |
| " Birthplace-City Jugar   | Geore State Ory     |
| " Residence-Street No. 22312  | Jenwood City Juaple |
| -Single<br>Widow  | st, 2nd or Srd      |
| Divorced ]  | B                   |
| Name of Father  | D. Adjand           |
| Maiden name of Mother   | may puche           |
| Date of this marriage   | June 30 1931        |
| Place of this marriage Sudams aboli   | - This              |
| Name and title of person<br>Performing this marriage  | Naminy & S          |
| His address Que Aun Apolio  | J J June            |
|   |                     |
| Witness { Name  |                     |
| Address   |                     |
|   |                     |

LEVEY PRINTING CO., INDIPLE. 27868 52-80

FILE L JUN 23 1930 Skenn B Palaton

509

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Max R. Rechts and williefg. packson Groom's name max R. Recken His are 33

State

Single-Widower 1st 2nd or 3re Divorced marriage Name of Father. Maiden name of Mothe Bride's name Her age. State City Street

4 color occupation ĸ Birthplace 4 Residence Single Widow 1st, 2nd or 3rd marriage Divoreed Name of Father Maiden name of Mother Date of this marriage. Place of this marriage Name and title of person Performing this marriage His addr

## Witness

4

" Residence

Birthplace

Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., INDIPLS. 27868 \$2-80

Name

Address



1510

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony   |  |  |
|---|--|--|
| Flord aused Reese and nellig Reig Wale  |  |  |
| Groom's name Floyd and Reese  |  |  |
| His age 23  |  |  |
| " color   |  |  |
| " occupation Truck Driver   |  |  |
| " Birthplace-City Alights Musta State A.  |  |  |
| " Residence-Street No. 1605C. Downa City  |  |  |
| Single Widower List, 2nd or 3rd marriage  |  |  |
| Name of Father Daniel Reese   |  |  |
| Maiden name of Mother helly watking   |  |  |
| Bride's name Mellie Reia Wale   |  |  |
| Her age   |  |  |
| " color   |  |  |
| " occupation  |  |  |
| " Birthplace-City Sublaucholis State  |  |  |
| " Residence-Street No. [. R. Brx 157 City Schaucholis   |  |  |
| Single Ist, 2nd or 3rd Mathematical for the second |  |  |
| Name of Father Melinain Wayle   |  |  |
| Maiden name of Mother. Thee Alevanian   |  |  |
| August 20-1931  |  |  |
| Date of this marriage   |  |  |
| Place of this marriage<br>Name and title of person<br>Performing this marriage  |  |  |
| His address Andreweppelis   |  |  |
| ······································  |  |  |
| Name If and Collier   |  |  |
| Witness Address Address Address Address   |  |  |

LEVEY PRINTING CO., IND'PLS. 27868 82-80



1511

| Marriage Record for Board of Health                                       |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony            |
| aman a alel gulsglift age trought & and                                   |
| Groom's name Curl L. Stewart  |
| His age 32  |
| " color_white   |
| " occupation Salaman  |
| " Birthplace-City State State   |
| " Residence-Street No. A Hanspork City. And                               |
| Single<br>Widower<br>Divorced<br>Divorced                                 |
| Name of Father Concerned At Stewart                                       |
| Maiden name of Mother Mutha & chmidt                                      |
| Bride's name Gladys Delara Afanis   |
| Her age 2 3   |
| " color white a   |
| " occupation Stens  |
| " Birthplace-City. Detrain State Mich                                     |
| " Residence-Street No. 5/03 & Cast City Indepe                            |
| Single ] [ lat and on and ]   |
| Widow         Ist, Zite of ore           Divorced         marriage        |
| Name of Father  |
| Maiden name of Mother   |
| Date of this marriage   |
| Place of this marriage 152/2 6 Cours Ar. Dreplo: 21                       |
| Name and title of person<br>Performing this marriage _ Justice of the Ben |
| His address 2914 Cario Dec. Draped - Sed                                  |
|   |
| Witness { Name  |
| Address   |
|   |

LEVEY PAINTING CO., IND'FLS. 27868 82-80

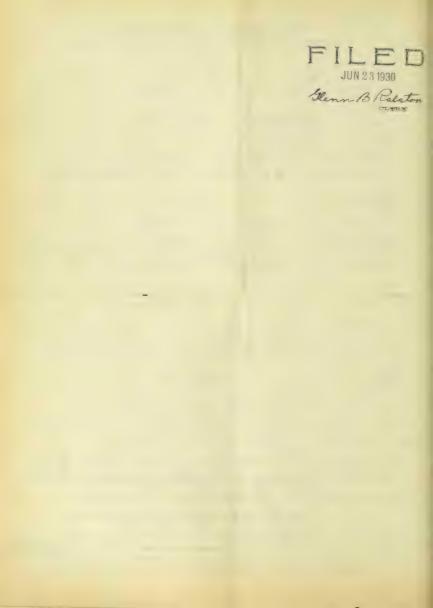
FILED

JUN 23 1930 Glenn B Relation

5 12

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

and mond Groom's name His age ... 4 color. occupation 4 TAL I CIM (1 u Birthplace-State anapetis " Residence-Street No. MAM 3 City Single 1st, 2nd or 3rd THE Divorced marriage Name of Father Maiden name of Mother Bride's name UMM 1 Her age. " color " occupation rendoury State 1 an C " Birthplace-1 Y nelice City и Residence INW nas -Street No. Single 1st. 2nd or 3rd Widow 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 Return this Report to County Clerk with License and Certificate



513 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony-21 and Groom's name His age " color occupation 4 Birthplace 10 4 State -City " Residence-Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name en Her age. 4 color Lite occupation 4 4 Birthplace-City State " Residence-Street No City Single Widow 1st, 2nd or 3rd 11 marriage Divorced Name of Father. Maiden name of Mother 0 29 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 1 His address Name Witness Address U



514 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Hassi and Groom's name His age. mer color... occupation. Birthplace -City State. Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age color. occupation Birthplace State Residence 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

Witness

4

4

"

ч

4

4

"

4

Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., IND'PLS. 27868 82+80

Name

Address

FILED JUN 2 4 1930 Glenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Tothe Don umada and eroal Ed war )er Groom's name. His age 2 color... " 0 et occupation num bol Birthplace State Residence и Street No .City Single Widower 1st, 2nd or 8rd Divorced Name of Father Maiden name of Mother Bride's name Her age. u 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

Return this Report to County Clerk with License and Certificate

LEVEY PRINTING CO., INDIPLE. 27868 \$2-80



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age ... Lik " color 4 occupation Birthplace 0 4 State 72 Residence--Street N City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father le Maiden name of Mother Bride's name Her age. 4 color occupation н Birthplace State " Residence Street No City 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 His address Name Da. Witness 20 Address

FILED JUN 23 1930 Sena 13 Recton

1517

|                                | rd for Board of Health<br>or Other Person Performing Ceremony |
|--------------------------------|---|
| Jula hyralls                   | and Elizabeth Mohtins   |
| Groom's name. I loy J          | aber  |
| His age 24                     |   |
| " color white                  |   |
| " occupation laster            |   |
| " Birthplace-City French o     | Lick State Ind  |
| " Residence-Street No. 305 80  | Lystone City Indpes   |
| Single                         | ist, 2nd or 3rd   |
| Name of Father                 | 1 Jaber   |
| Maiden name of Mother          | nie Freeman   |
| Elini                          |   |
| Bride's name                   | of Kaphino  |
| Her age 2/                     | · · · · · · · · · · · · · · · · · · ·                         |
| " color                        |   |
| " occupation Orauscheepe       |   |
| " Birthplace-City              | flisville State Sul   |
| " Residence-Street No. 15348   | Brown City Sud  |
| Single-<br>Widow<br>Divorced   | Tst, 2nd or 8rd<br>marriage                                   |
| Name of Father                 | on Walls  |
| Maiden name of Mother          | unni Starbrough   |
| Date of this marriage          | June 20-1931  |
| Place of this marriage         | Ent ru  |
| Performing this marriage       | Alexing of generally  |
| His address Trullelle gulle Ju | I b b   |
|                                |   |
| Name Mro Ar                    | hin Stall   |
| Witness Address 1534 8         | Belmonte Indepts  |
|                                |   |

FILED JUN 24 1930 Seman B Ratation 1

1518

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

| a  | nd  |
|--|---|
| Groom's name anthres The uner  | rus free all is   |
| His age  |   |
| " color de ité   |   |
| " occupation / inter to inter  | -~ ·  |
| " Birthplace-City  | State   |
| " Residence-Street No. + 4 4 4 1/2   | City Jacking Louis  |
| Single<br>Widower<br>Divorced  | 1st, 2nd or 3rd   |
| Name of Father   | hart G and  |
| Maiden name of Mother  |   |
| Bride's name   |   |
| Her age  |   |
| " color  |   |
| " occupation   |   |
| " Birthplace-City  | State.  |
| " Residence-Street No  | City  |
| Single<br>Widow<br>Divorced  | { 1st, 2nd or 3rd marriage }  |
| Name of Father   | tratite section 1   |
| Maiden name of Mother  | in the second |
| Date of this marriage  | K 1931.   |
| Place of this marriage 1974 Wordlan<br>Name and title of person<br>Performing this marriage Rec. 7 Les | more Indianappli  |
| His address 1314 Wordlam   | Jazz-   |
| Indingpolis.   | Indrana   |
| Witness Name J. D. Juch  | Twe 217 & Marahue   |
| Address 116 J UCHUV  | in a star of  |

FILED JUN 23 1930

Glenn B Ralston OLERK

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 19 Mary toy and ann. in tu Groom's name His age. 4 color. 4 occupation. Birthplace State Residence-Street No. all. City " Single 1st, 2nd or 3rd Widow Divorced marriage Name of Father Maiden name of Mother an Bride's name Her age. ule 4 color rone occupation Birthplace un State 4 an Residence " -Street No City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. nne 2 31 Date of this marriage Chr Place of this marriage. Name and title of person Performing this marriage, \*nc ixM no nue His address lias Witness WhyTon ( Address

LEVEY PRINTING CO., IND'PLS. 27868 \$2-80



1520

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

| Claude C. Ward and Mable anna C'neill  |
|--|
| Groom's name Claude Cr. Ward   |
| His age 28   |
| " color while  |
| " occupation <u>Mierisles</u>  |
| " Birthplace-City Kirklin State Lund   |
| " Residence-Street No. 2330 Hallas UCity Chicagy   |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>Divorced List, 2nd or 3rd<br>marriage List, 2nd or 3rd               |
| Name of Facility   |
| Maiden name of Mother  |
| Bride's name Mables and O'heill  |
| Her age  |
| " color white<br>" occupation brockheaper  |
| " Birthplace-City Martononey State Lud.  |
| " Residence-Street No. 1920 M. New Ing City Indeanifuly  |
| Single<br>Widow<br>Divorced } [1st, 2nd or 3rd<br>marriage<br>O feist  |
| Name of Father John J. Marte   |
| Maiden name of Mother Country  |
| Date of this marriage from 20 2 19 3/  |
| Place of this marriage Judica polis<br>Name and title of person<br>Performing this marriage Jole J. Preutice, neuristu |
| His address Balford Indiana  |
| 1508 J. Street   |
| Witness { Name Inio L. Worrelf<br>Address Dannille, Indiana  |

Return this Report to County Clerk with License and Certificate

LEVER PRINTING CO., INDIPLS. 27868 82-80



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

| and  |
|--|
| Groom's name   |
| His age  |
| " color  |
| " occupation indicate with   |
| " Birthplace-City.   |
| " Residence-Street No. 12 26 Window City City Milliane City  |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>marriage   |
| Name of Father   |
| Maiden name of Mother  |
| Bride's name Her age " color   |
| " occupation   |
| " Birthplace-City. Annual State  |
| " Residence-Street NoCity  |
| Single<br>Widow<br>Divorced 1st, 2nd or 3rd<br>marriage  |
| Name of Father   |
| Maiden name of Mother. Vasulbune Ilfulace  |
| Date of this marriage  |
| Place of this marriage with the second secon |
| His address <u>5.50° Ph. Motomes aut</u>   |
|  |
| Witness { Name   |

Return this Report to County Clerk with License and Certificate

LEVER PRINTING CO., INDIPLS. 27868 \$2-80

FILED JUN 23 1930 Glenn B Relation

T. 21 K

.

1522

|         | Marriage     | Record      | for Boa   | rd of    | Health     |         |
|---------|--------------|-------------|-----------|----------|------------|---------|
| To Be R | eturned by l | Minister or | Other Per | son Perf | forming Co | eremony |
| • •     | 1 ~ )0       | 0 0 0       |           | 0 0      | 1          | 1       |
| she     | hall Hom     | dulch and   | Edil      | hy.      | Hasp       | n       |

Groom's name His age. 4 color u occupation h Birthplace State " " Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage 10 Name of Father Maiden name of Mother 11 Bride's name Her age 4 color occupation Birthplace State 4 u Residence-Street No City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Mars 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

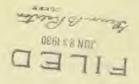
Ina

FILED JUN 29 1930 Stemme B Repts

1523

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| Loranzia albright and Ruth micinda Johnson   |
| Groom's name Loranzie albright   |
| His age 29 2700. 6 2000,   |
| " color white  |
| " occupation Labor   |
| " Birthplace-City_ShoaleStateState   |
| " Residence-Street No. Shoals City Indiana   |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>marriage   |
| Name of Father J. albright   |
| Maiden name of Mother Uda Florence Wagward   |
| Bride's name Pull minda Johnson  |
| Her age 23   |
| " color_White  |
| " occupation House work  |
| " Birthplace-City Indianapolia State Indiana   |
| " Residence-Street No. 1808 ashland and City Indianapolio Ind  |
| Single<br>Widow<br>Divorced Jungle [1st, 2nd or 3rd<br>marriage ]  |
| Name of Father Usear Johnson   |
| Maiden name of Mother Munue Caitle Johnson   |
| Date of this marriage 21, 1931   |
| Place of this marriage 1888 Oshland ave, Indianapolis, Ind.<br>Name and title of person<br>Performing this marriage Minister - Gen. W. H. Frye |
| His address. 36.18 6. 30 2 51  |
| Indianapolio Indiana   |
| (Nam My O Scar Do finson Do minine Elile show  |
| Witness Address 1.8.0.8. Glackland 9.12  |

LEVEY PRINTING CO., INDIPLS. 27868 82-80



6 74

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

Ba m and M. Groom's name... 54 His age ... color M 4 occupation 4 Birthplace-City. State de Residence 0 " Single Widower Divorced 2 1st, 2nd or 3rd marriage Name of Father 0 Maiden name of Bride's name Her age color ( 4 occupation of 44 natio State u Birthplace--Ci20, Ballenne " Residence-Street Single Widow 1st, 2nd or 3rd marriage Divorced M Name of Father Maiden name of Mother.J Jen Date of this marriage Aur Name and title of person R Performing this marriage His address ithmare Name M Witness W Address



1525

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

| and  |
|--|
| Groom's name marky Duen  |
| His age twenby - it  |
| " color  |
| " occupation Baring  |
| " Birthplace-City Riscemer. State Alabama                            |
| " Residence-Street No. 536 W 12" City Online Mis                     |
| Single<br>Widower<br>Divorced Lingle Ist, 2nd or 3rd                 |
| Name of Father June Dun  |
| Maiden name of Mother And E Oren                                     |
| Bride's name Connie & washington                                     |
| Her age twenty fart.   |
| " color Colored.   |
| " occupation want want   |
| " Birthplace-City allenwill state Joy.                               |
| " Residence-Street No. 22 6. Earn and city Indianglus                |
| Single<br>Widow<br>Divorced  |
| Name of Father William Wishington                                    |
| Maiden name of Mother Jamma Washingbon                               |
| Date of this marriage.   |
| Place of this marriage Mar Bride 36 Carton ave                       |
| Name and title of person Performing this marriage Printy Buy, muster |
| His address 536, W 122 .   |
|  |
| Witness Name alie Weltwelly<br>Address. 425 Bris tot.                |
|  |



Glenn B Relation -

:

1266

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony  |
|--|
| from and an all sand Mall and Paper  |
| Groom's name Unance Andrew Millingoril   |
| His age  |
| " color. The hite  |
| " occupation Bailes maker  |
| " Birthplace-City Charles State State  |
| " Residence-Street No. 2/38 GrondulCity Indranaparia   |
| Single<br>Widower<br>Divorced  |
| Name of Father Angent the state water to   |
| Maiden name of Mother And Dody & Balan   |
| Bride's name Dra La La Calasanan   |
| Her age  |
| " color_White  |
| " occupation   |
| " Birthplace-CityStateState  |
| " Residence-Street No. 2/39 march City for manakalic   |
| Single<br>Widow<br>Divorced Ist, 2nd or 3rd<br>marriage  |
| Vame of Father Confer for An and a former for the second s |
| Maiden name of Mother (  |
| Date of this marriage June 21 st 1931  |
| Place of this marriage 6.0 6 Virginie and<br>Name and title of person Revend Amanda Margan   |
| Tis address 606 Virginia an<br>Indranapalis Ind  |
| Witness Name Ale & Grandberg 608 Ding gan and  |

LEVEY PRINTING CO., INDIPLS. 27868 52-80



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Yun B. largares Authorn. 6 and on Groom's name. y ag His age и color 4 occupation Birthplace State 4 " Residence-Street No City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 1 -Maiden name of Mother Bride's name Her age. de 4 color " occupation State 4 Birthplace City City. u Residence-Street No Single Widow 1st, End or 3rd marriage Divoreed Name of Father -Maiden name of Mother. 21. 193 Date of this marriage Place of this marriage. Name and title of person Performing this marriage. au His address. Name. Witness Address



1528 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony und Fare CILE. and Groom's name His age .... 4 color 44 occupation Birthplace-State " -City Residence-Street No " Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 4 color. 4 occupation " Birthplace-State – Citv 4 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



1529 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony linan and Groom's name. His age 20 arna 4 color. ST 4 occupation State 4 Birthplace-City u Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother N Bride's name 20 Her age ... 4 color mala. 4 occupation State 4 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 Return this Report to County Clerk with License and Certifica/te



To Be Returned by Minister or Other Person Performing Ceremony Jamis Drin Elizabeth Carter. is and Ruth Groom's name... in Jonn 21 His age white color 4 land occupation State 4 Birthplace-City 4 Residence-Street City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. rel en Bride's name 0 Her age 151 color in occupation Birthplace State 4 " Residence-Street Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. inc 3 22 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

1530

•

FILED

JUN 23 1930

Genn B Relation CLERK

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Bennie bett-Guna and Groom's name u 24 His age 4 color... to occupation Birthplace-City State Residence-Street No. " A City Single RD Widower 1st. 2nd or 3rd Divoreed marriage Name of Father Maiden name of Mother be ~ Bride's name Her age ... hx " color st 0 occupation 4 Birthplace-City State -11 120 en Residence-Street No. u City Single A 1-2 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 M Name Witness Address



To Be Returned by Minister or Other Person Performing Ceremony - 8 -19 and Groom's name. e 3 2 His age ... 4 color.... occupation ela Birthplace State 5 и Residence-Street No. Single Widower 1st, 2nd or 3rd Divorced marriage viz: 1 Name of Father an Maiden name of Mother. Gartri Bride's name Her age 4 color. raph occupation nila abarell 4 Birthplace State to 0 Residence-Nal 4 -Street No. City Single 1st, 2nd or 3rd Widow 20 marriage Divorced Name of Father Maiden name of Mother \_\_\_\_\_ 9 3 Date of this marriage Place of this marriage. Name and title of person 29 Performing this marriage f. His address the Name Witness ddres

Marriage Record for Board of Health

1532

FILED JUN 241930 Glenn B Reesten

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and este Groom's name His age. " color. 1 44 occupation " Birthplace-City State 900 U Residence-Street No. 4 ч City Single Widowor 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother Bride's name Her age. 6 color. occupation ñ Birthplace-City State 900 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



1534

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Robert E. Well and Emogene Miller   |
| Groom's name Robert E. Wells  |
| His age 21 312,   |
| " color Colored   |
| " occupation Porter   |
| " Birthplace-City Indianapolis State Indiana  |
| " Residence-Street No. 1718 & Kaystone City Indianapolin  |
| Single<br>Widower<br>Divorced Ist, 2nd or 3rd J. Thast  |
| Name of Father Classance Wells  |
| Maiden name of Mother Mary Bell Lewis   |
| Bride's name Emogene Miller   |
| Her age 19 yrs.   |
| " color Colored   |
| " occupation Madian City Haspitel   |
| " Birthplace-City Indianapolis State Indiana  |
| " Residence-Street No. 927 pacast City Eitz Mindianopol;  |
| Single<br>Widow<br>Divorced List, 2nd or 3rd Januat   |
| Name of Father Usion Miller   |
| Maiden name of Mother Dillia Dickins  |
| Date of this marriage June 22, 1931   |
| Place of this marriage Indianapoli's  |
| Name and title of person Fer. S. W. Marin   |
| His address 1801 Shelby St.   |
| Indianapoliz Ind.   |
| Name Luna Mar Marino  |
| Witness Address 1801 Shelloy St.  |
|   |

Return this Report to County Clerk with License and Certificate



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

1535

and. Groom's name 3 His age. ite " color... occupation 4 Birthplace-City. State Residence-Street No. 4 na City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father 0 Maiden name of Mother anne Bride's name Her age. " color. er. occupation 4 nese 4 Birthplace-City. State п Residence-Street No. cume City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. er Maiden name of Mother. un Date of this marriage Place of this marriage. Name and title of person Performing this marriage 2 5 His address Name Witness Address



1536

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                 |
|---|
| Abbett and Summers  |
| Groom's name Edwin Thompson Abbert  |
| His age 23  |
| " color while   |
| " occupation  |
| " Birthplace-City Indianapolis State Andraua  |
| " Residence-Street No. 4338 College City Indiangeolio   |
| Single  |
| Name of Father & Abbett   |
| Maiden name of MotherBennice Thompson   |
| Bride's name Mahala Irmajean Summers  |
| Her age 2 /   |
| " colorWhate  |
| " occupation File Clark   |
| " Birthplace-City Indianapolio State Indeana  |
| " Residence-Street No. 3. 6. 0. 6. N. Keyslowe City Indianafortio   |
| Vidow Jugle [1st, 2nd or 3rd / 27<br>Divorced]  |
| Vame of Father for Liemmens   |
| Naiden name of Mother. Eva Grace Golding  |
| Date of this marriage   |
| Place of this marriage Induanapoleo<br>Name and title of person<br>Performing this marriage M. C. Hartinger, Minister |
| Is address 2157 Park Arr. Indianapoles, Mud-  |
| Vitness Name Juny O. Rebert<br>Address \$80.2 Or Cans threet  |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Herman alla and ( Groom's name. Hell 0 ... 202 His age 39 ght color... det or occupation u 4 Birthplace-City. State " Residence-Street No.615 Madison Jue. Single Widower 1st, 2nd or 3rd Divorced marriage color 2  $\cap$ Name of Father Tda Maiden name of Mother... Bride's name 30 Her age .. De color.... Dar 4 occupation grove 4 Birthplace-City State " Residence Street No. 605 Made Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother 1931 Date of this marriage. Place of this marriage. Name and title of person, 12 0 Performing this marriage His address Name Witness Address Return this Report to County Clerk with License and Certificate

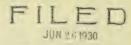


Glenn B Relation

1539

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

and ince 19 Groom's name His age ..... " color. 4 occupation Ц Birthplace-City State " Residence-Street No Cit Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mo nessersma Bride's name Her age. 4 color 4 occupation 4 Birthplace-City ч Residence -Stree City -162 Single 1st. 2nd or 3rd Widow 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 R Name Witness Address



Glenn B Perton

1539 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony WARD. Wand alle Groom's name. His age 23 color white а Š am occupation 4 rens " Birthplace-City. Lu State " Residence-Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mothe Bride's name Her age ...... whit color " faus 1 del occupation .... Birthplace-City. Stote 4 ч Residence-Street No City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother Date of this marriage dr Place of this marriage. Name and title of person Performing this marriage. His address 111 Name Witness Address



1540

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 00 ar and en Groom's name His age 4 color. Lor " occupation a 1 Birthplace-City Bawar State. 4 (Bales) St " Residence Street No. 722 City. Single Widower 1st, and or 3rd Divorced marriage a Name of Father Maiden name of Mother. Mout Bride's name 00 11 Her age 4 color her 8.8 4 occupation es1 4 Birthplace-Al State City 0 45 а Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. PE Maiden name of Mother. 23 Date of this marriage 11 110 Place of this marriage. Name and title of person Performing this marriage His address a Name Witness Address 120 inn



To Be Returned by Minister or Other Person Performing Ceremony Moena Tagin and 32 60-Groom's name. 35 His age .... L. u color occupation Birthplace-City State aboles 4 Residence-Street No. City Single Widower 1st. 2nd or 3rd marriage ena Name of Father ann Maiden name of Mother In Idai mi Bride's name 12 Her age. 4 color. occupation 4 Birthplace-City. " 1 .... State Residence-Street No. 146 M. 5-6 ч City Single 1st. 2nd or 3rd Widow marriage Divorced allering adais Name of Father Maiden name of Mother Henritta Cohn Date of this marriage 2 3 Place of this marriage Name and title of person Performing this marriage His address an Name Witness Address

Marriage Record for Board of Health

154



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

Groom's name ano His age ..... " color. Pil occupation mer Birthplace -City State Residence-Cit Jamo Single V Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother 7m Asraul Bride's name n un NO Her age ..... hito color grapher occupation 110 mann Birthplace-State Residence--Street No. City Single Widow 1st, 2nd or 3rd marriage Divorced auda Name of Father araare Maiden name of Mother. Date of this marriage in 0 Place of this marriage Name and title of person Performing this marriage His address Name Ma Witness Address



1543

| Marriage Record for Board of Health   |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony  |
|   |
| and   |
| Groom's nameMulton  |
| His age   |
| " color_ white  |
| " occupation Resturning worker  |
| " Birthplace-City Macmutle State James  |
| " Residence-Street No. 6's wilkin It City Qued.   |
|   |
| Single       Widower       Biworced         Ist, 2nd or 3rd       marriage  |
| Name of Father Million Builon   |
| Maiden name of Mother farmey thate  |
| Bride's name Malsle may hopegales;  |
| IF I I I I I I I I I I I I I I I I I I  |
| Her age   |
| " color. White  |
| " occupation Hause gich   |
| " Birthplace-City_ Lincoln_State 24   |
| " Residence-Street No. 12.11 & Mending City 6 24  |
| Single<br>Widow<br>Divorced 1st, 2nd or 3rd<br>marriage   |
| Name of Father hom J. deoughter   |
| Maiden name of Mother. Ida & K. massin  |
| Date of this marriage   |
| Place of this marriage 1.0.45 6 hurch It Indianopolis Indiana,<br>Name and title of person Rev. J. 6. Worknick, 10456 hurch At Indianipolis |
| His address Indiana   |
|   |
| Witness Name Non G. Jocoba,<br>Address Ida S. Jacoba,   |
|   |

FILED JUN 26 1930

1544

| Marriage Record for Board of Health                             |
|---|
| To Be Returned by Minister or Other Person Performing Ceremony  |
| Robert B. Berner and Marcella & Mathews                         |
| Groom's name_ Rofert B Berner                                   |
| His age   |
| " color   |
| " occupation Grance   |
| " Birthplace City & Laughtles State                             |
| " Residence-Street No. 35 40 1. Menuancity. Salanapples         |
| Single / Ist, 2nd or 3rd<br>Divorced / / Divorced               |
| Name of Father Louis C. Berne                                   |
| Maiden name of Mother Maile Bosley                              |
| Bride's name Marcella Ollathews                                 |
| Her age 19<br>" color. White                                    |
| " occupation Atutent  |
| " Birthplace-City Indianapolis State June                       |
| " Residence Street No. 3124 Mach, Block Burder auchiles         |
| Singlet<br>Widow<br>Divorced                                    |
| Name of Father Horace Ray Matters                               |
| Maiden name of Mother_ Cara Bella pres                          |
| 0 911 1021  |
| Date of this marriage   |
| Place of this marriage  |
| Name and title of person Rever 10th 7. Apt Reuchugen            |
| His address Archianeppeirs ,                                    |
| V   |
| Name & rouge Dale Walshory                                      |
| Witness Address Rohney Indiana.                                 |
| Return this Report to County Clerk with License and Certificate |

LEVEY PRINTING CO., IND'PLS. 27868 82-80

FILED JUN 30 1930 Seman B Relation

1545 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and 1. Eder Enry Groom's name His age .. " color. nton occupation Birthplace--City State Udeave Residence-Street man d Single 1st, 2nd or 3rd Widower Divorced man MAA Name of Father Maiden name of Mother. Bride's name Her age color ne occupation 1d Birthplace State IV al Residence Street No City Single 1st, 2nd or 3rd Widow marriage Divorced KO Name of Father Maiden name of Mother A Date of this marriage Place of this marriage. Name and title of pers Performing this marria His address Name Witness

"

4

4

4

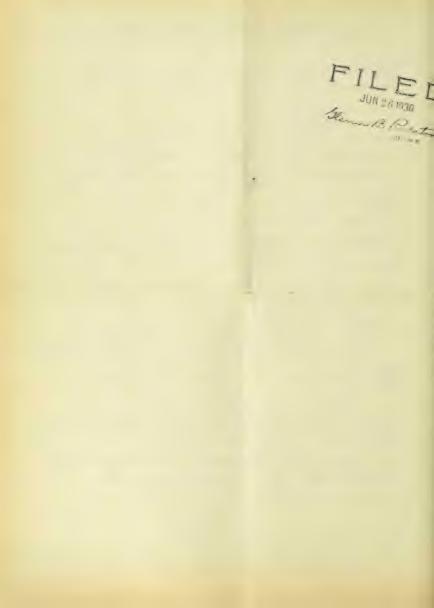


1546

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Willand M Genes and Couling & Keys  |
| Groom's name Willard M. Ferrer  |
| His age 37  |
| " color white   |
| " occupation S sleamon  |
| " Birthplace-City   |
| " Residence-Street No. 807 6 25 4 City Judgla   |
| Single       Widower       Divorced         7         Test, 2nd or 3rd                                |
| Name of Father ungil the June   |
| Maiden name of Mother Sarah allen Malearty  |
| Bride's name Pauline B Aleys  |
| Her age. 2.7  |
| " color white   |
| " occupation & she faly   |
| " Birthplace-CityStude_contly_State_Jud   |
| " Residence-Street No. 4 41 C. 16 th City Supple  |
| Single     / widow     / widow       Widow     / Sirone     [1st, 2nd or 3rd marriage]                |
| Name of Father John Thomas f  |
| Maiden name of Mother Lewing A. Mum   |
| Date of this marriage   |
| Place of this marriage. The drug stroly Jud   |
| Name and title of person Alw & Manuary  |
| His address Indunapalie Jud by  |
|   |
| Witness { Name  |
|   |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Isa Bergan Bruce rance and Groom's name Bruce 24 His age ..... 1h 1. color.... 4 Big Jon occupation Birthplace-City. State u Residence-Street No. 3 ingoold City naspoli Single 0 Widower mal tint 1st, 2nd or 3rd Divorced marriage Name of Father 10 Maiden name of Mother. marga Bergar Bride's name Her age. 4 color... occupation Deefers Birthplaceidiana polis State - City. 14 Residence-Street No. ng gold .City. а Single 1st, 2nd or 3rd Widow Smale marriage Divorced Name of Father. ergan Maiden name of Mother Date of this marriage inc Place of this marriage. 10 anapo Name and title of person Performing this marriage. n ler His address..... Trar. 7 sl. nes Name Witness 101 8 ddress



1548

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 6 al and Groom's hame His age ... 4 color. 4 occupation Le State 4 Birthplace-City Residence-Street No. 0 а City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mothe Bride's name. Her age .. 4 color. 4 occupation u Birthplace-City State Residence-Street No. 4 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 marriag His address. Name. Witness Address



549

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony tel, and and and Groom's name. Ra NAL mon JUN His age the " color occupation. Jaw amuna Birthplace-City mest 240 State. mo. Residence-Street No. City 4 Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother N Bride's name m Her age ... color\_\N the 4 occupation Donnuts Birthplace-City. State Residence-Street No. " .City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father NW Maiden name of Mother... 1 Lanus SH Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Yler Name Witness Address.

FILED JUN 20 1930

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name. Columan O 10.0 His age & Tin ч color 1 neen occupation. 4 Birthplace-City Ilmanaran 4 State Residence-Street No. " City Single Widower 1st. 2nd or Divorced marriage Name of Fathe 001 Maiden name of Mother Mal Bride's name Ne. 200 Her age In W 4 color... occupation Domestre Ana Birthplace-City. 1119 6 State Residence-Street No. 5.37 Word City 4 1au Single 1st, 2nd or Srd Widow marriage Bivorced Name of Father Maiden name of Mother Care ? E. Date of this marriage. Place of this marriage. Name and title of person Performing this marriage aw askur 120 un. His address Name Witness Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony RAAR and ruce Groom's name His age " color et occupation a Birthplace-City al. - State и Residence-Street No. City Single Widower 1st, 2nd or 3rd -Divorced marriage Name of Father Maiden name of Mother Bride's name Her age\_\_\_ " color en occupation Unlea eca State Birthplace-City 4 remory ч 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 Minister or Other Person Performing Ceremony J.CK and Groom's name Y 7 2 His age ... color. 10 occupation 4 Birthplace-Residence 4 Stree Single Widower 1st, 2nd or 3rd -Divorced marriage Name of Father Maiden name of Mother Bride's name Her age color. occupation 4 Birthplace State Residence " Single Widow 1st, 2n -01 marriage Divorced Name of Father Maiden name of Mother. 3 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 8 0 His address Name Witness 2312 Address

FILED JUN 26 1930 Stenn B Relation

1553

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony McKeand and Villiam 'CDand Groom's name m dec. 20 His age. Whit ш color... occupation .... н Birthplace-City State Residence-Street No. 21 6 а City Single 1st, and or 3rd Widower Divorced marriage and Name of Father ρ mell Maiden name of Mother ancho nico Bride's name Born U Her age .---Whil color ndery occupation ndianapoh 4 Birthplace-City State 2 Church 9 0 и Residence-Street No. na City Single 1st, 2nd of 3rd Widow marriage Divorced N 8 Name of Father 2.0 a 200 Maiden name of Mother a dr Date of this marriage dianapolos Place of this marriage Name and title of person oth nes Performing this marriage His address ndeanont Calos arh auno Name / Witness

FILED JUN 25 1930 Stenn B Relatio

1554

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony   |
|---|
| Croom's name & Robert Reves   |
| His age 28 year   |
| " occupation  |
| Single<br>Widower<br>Divoreed<br>Name of Father.<br>Maiden name of Mother<br>Maiden name of Mother<br>Maid |
| Bride's name D. Marie Carcon  |
| Her age 73 4/2.<br>" color Matter<br>" occupation Muse<br>" Birthplace-City Maluson State Province  |
| " Residence-Street No. 1407 1, MalanaCity Andrewschus<br>Single<br>Wittow<br>Divorced Small<br>Name of Father. Jorge Cajeon   |
| Maiden name of Mother Cathering Penes   |
| Date of this marriage Synce 24, 1931.<br>Place of this marriage Scharabelie . Ind<br>Name and title of person<br>Performing this marriage Semand Reviden, Jaston & Francis & Selle Lind   |
| His address 3191 Avorlale Place   |
| Witness Name Rennes Releved and Dorother armett<br>Address 2028 Brooker le dre 1402 Malalanes H   |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony exon lin ANACK callar rus Jalo Groom's name. esur. His age " color Ine occupation Birthplace-City ..... State " Residence-Street No. City Single 1st. 2nd or 3rd Widower HIN Divorced marriage Name of Father Maiden name of Mother on Bride's name Her age .... 4 color. occupation Birthplace-City. State " Residence-Street No. City Single 1st, 2nd or 3rd m 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. 110 Name Witness J alla Address

FILED JUN 26 1930 Stenn B Reetin

1556

|    |    | Marria   | age | Record      | for  | Board     | of  | Health           |
|----|----|----------|-----|-------------|------|-----------|-----|------------------|
| To | Be | Returned | by  | Minister or | Othe | r Person. | Per | forming Ceremony |

| and   |
|---|
| Groom's name Bates Jolanso-   |
| His age   |
| " color   |
| " occupation Notten   |
| " Birthplace-City Altonomous State mis  |
| " Residence-Street No. 129 2.4 CityCity   |
| Single<br>Widower<br>Divorced Jungle [1st, 2nd or 3rd ]   |
| Name of Father Jales John Man   |
| Maiden name of Mother   |
| Bride's name Wind What Tatte burgath  |
| Her age   |
| " colorCalcro   |
| " occupation officeral wife -   |
| " Birthplace-City Jananuelle State King   |
| " Residence-Street No. 127 10 95 City Inchange lin  |
| Single<br>Widow<br>Divorced   |
| Name of Father Marley Meatt   |
| Maiden name of Mother   |
| Date of the marriage from 24 1931   |
| Place of this marriage <u>Station for the state</u><br>Name and title of person<br>Performing this marriage <u>State</u> , <u>H. Statusco</u> , |
| His address 2116 Blac place   |
| - Indianapplia And.   |
| Name Mr. Maul Danis   |
| Witness Address 24 12 Indianapolis And  |

FILED JUNE 1930

1557

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

Tous Th and arl Gr uller Groom's name re His age и color the occupation 4 man " Birthplace-City State " Residence-Street No.710 Single Widower Lu 1st. 2nd or 3rd Divorced marriag Name of Fathe na Maiden name of Mother Bride's name as & in in color. When " freeker ap. occupation asio Birthplace-City. State Residence-Street No/231 Starfleell 4 Single 1st, 2nd or 3rd usla Widow marriage Divorced Name of Father Maiden name of Mother. tere Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Addre

EILED

1550

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Jaul 0 41 do arom 0 Meve and aul udegroon Groom's name no 2di His age .... 44 color sman occupation 6 " Birthplace-City. State Residence-Street No. 3 nuarleity 4 Single Widower> 1st, 2nd or 3rd Divorced MAJAA doar som Name of Father ou Maiden name of Mother. evice Bride's name Her age. " color. oaraper 4 occupation 0 secori 0 Birthplace-City State 4 MucheganCity 4 Residence-Street No 0 Single 1st. 2nd or 3rd Widow marriage-Divorced an al Name of Father Na Maiden name of Mother All une and Date of this marriage Place of this marriage ruako Name and title of person Performing this marriage. Lan His address 1.01 EN Name Witness Address S



1559

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                  |
|--|
| Donald Ceril Beeler and Sylvia E. Beeler   |
| Groom's name Donald Ceal Beeler  |
| His age <u>31 years</u>  |
| " color_ white   |
| " occupation Frick Oriver  |
| " Birthplace-City_dudianapolis_State_dud   |
| " Residence-Street No. 1085 W. M. Carty City Indpls.   |
| -Single<br>Widower<br>Divorced   |
| Name of Father Fred J. Beeler  |
| Maiden name of Mother Lula E. Wright   |
| Bride's name Sylvia E. Beeler  |
| Her age 21   |
| " color While  |
| " occupation House - Rufu  |
| " Birthplace-City cludranapolis State Ind,   |
| " Residence-Street No. 801 Run ane, City Indfls;   |
| Single         1st, 2nd or 3rd           Widow         marriage  |
| Name of Father Thomas Skiles   |
| Maiden name of Mother Risca Buncom   |
| Date of this marriage June 25' 1931  |
| Place of this marriage Indianafolio<br>Name and title of person<br>Performing this marriage Ephrain Dr-Lowe (Ministry) |
| His address chudimapolio, chudiana   |
| 1115 autu too  |
| Name Mabel Scatte,   |
| Witness Address 129. M. Comment St. Sadianapolis, Sad  |
| Return this Report to County Clerk with License and Certificate  |

FILED JUN 27 1930

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Evere Mand Tarala Groom's name His age " color.... ч occupation. " Birthplace-City. m Stat 4 Residence-Street No Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. u color..... none " occupation 4 Birthplace-City .State " Residence--Street Single 1st. 2nd or 3rd Widow marria Divorced Name of Father. Maiden name of Mother Date of this marriage. Place of this marriage.4 Name and title of person Performing this marriage His address 1. Name Witness Addres

FILED Glenn B Relation

1561

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |                                |  |  |  |  |
|---|--------------------------------|--|--|--|--|
| morris C Evert  | and Lenna in merulechell       |  |  |  |  |
| Groom's name Monis Q  | Earth                          |  |  |  |  |
| His age 30  |                                |  |  |  |  |
| " color. White  |                                |  |  |  |  |
| " occupation Electrition  |                                |  |  |  |  |
| " Birthplace-City Fort Man  | me Sichate                     |  |  |  |  |
| " Residence-Street No. 122 The  | ling ao city                   |  |  |  |  |
| Single<br>Widower<br>Divorced J Lenone Men<br>Divorced S M 8  | Marriage                       |  |  |  |  |
| Name of Father Score Teor   | -tt-                           |  |  |  |  |
| Maiden name of Mother   | Hoster                         |  |  |  |  |
| Bride's name Lenna Kun  | derhall                        |  |  |  |  |
| Her age/8   |                                |  |  |  |  |
| " color arhit   | <u> </u>                       |  |  |  |  |
| " occupation  |                                |  |  |  |  |
| " Birthplace-Cityndianofr   | les State Inline               |  |  |  |  |
| " Residence-Street No   | City                           |  |  |  |  |
| Single<br>Widow<br>Divorced   | 1st, 2nd or 3rd       marriage |  |  |  |  |
| Name of Father Jesse menden   | hall                           |  |  |  |  |
| Maiden name of Mother Jenova Je   | Ason                           |  |  |  |  |
| Date of this marriage.  | 1931                           |  |  |  |  |
| Place of this marriage  | Fidianapolie                   |  |  |  |  |
| Name and title of person<br>Performing this marriage  | mus Hixson Munistre            |  |  |  |  |
| His address   | 31 h. Colorado                 |  |  |  |  |
|   |                                |  |  |  |  |
| Witness { Name  |                                |  |  |  |  |
| Address   |                                |  |  |  |  |

B Recettion create LILED

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Follars Gilt and Groom's name. His age ..... color. " occupation ... -1 Birthplace-City State 4 " Residence-Street No. Cit Single Jan Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ... thele color. occupation 4 Birthplace-City 20MAI State -Street No/ 305 Dury 8 " Residence-Tity B Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother daus 2. Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness

FILED JUN 27 1930 Stemm B Rest

1523

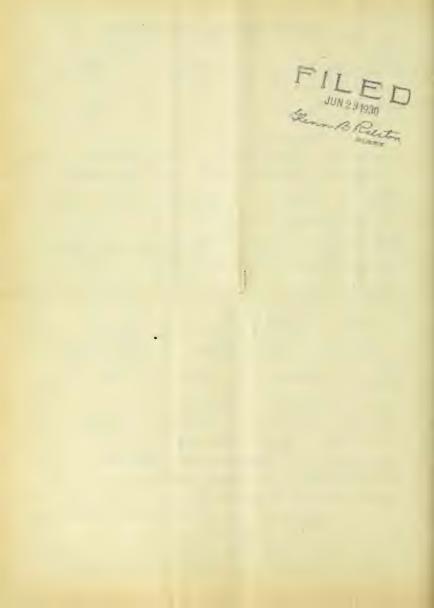
## Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony

| and  |
|--|
| Groom's name Amis- Join Junguan  |
| His age 20   |
| " color  |
| " occupation Dritn's affin   |
| " Birthplace-City. Indurry ris State In  |
| " Residence-Street No. 7 2 5 1. Curles City Indempoli  |
| Single<br>Widower<br>Divorced =<br>Name of Father John Eagan Jung um   |
| m a creation   |
| Maiden name of Mother  |
| Bride's name May Elij Roth Mary  |
| Her age  |
| " color  |
| " occupation - plingaple   |
| " Birthplace-City Kinnunky State the   |
| " Residence-Street No/ U 02 Na Euces City Intrappin  |
| Single<br>Widew<br>Divorced  |
| Name of Father M alian Henry Matty   |
| Maiden name of Mother Milig Olive W Ulicama  |
| Date of this marriage June 25 - 1931   |
| Place of this marriage Auther Itanier Inuch<br>Name and title of person<br>Performing this marriage Rev- Charles Suffy |
| His address 1310 N. Wallace that   |
| Indianapolis Indiana   |
| Witness Name Address 7 15 M. Euler 1419 Martalene  |



1564

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Regnard J. Johnson and millered T. Calind   |
| Groom's name Ragnan J. Johanson   |
| His age 34  |
| " color   |
| " occupation desurges   |
| " Birthplace-Citylock holeState   |
| " Residence-Street No. 3 214 E. 13 Dor- City Interes polic  |
| Single<br>Widower<br>Divorced June 1st, 2nd or 3rd<br>marriage June 1                                 |
| Name of Father Jrit jage J.                                       |
| Maiden name of Mother Imma dindepter  |
| Bride's name Mildred T. Collins   |
| Her age 3.4   |
| " color   |
| " occupation Chinese how to   |
| " Birthplace-City StateState  |
| " Residence-Street No. 502 E- 23" 51- City Internapolis   |
| Single<br>Widow<br>Divorced 1st, 2nd or 3rd<br>marriage   |
| Name of Father Tickey T- Colour   |
| Maiden name of Mother June h. Tanked  |
| Date of this marriage   |
| Place of this marriage I. R. Eckarde .  |
| His address 623 E. Wash. Dr.  |
| Treeacaste Indian   |
| Name PO Callur  |
| Witness Address 1235 Jus Riley.   |
|   |



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

and in Groom's name 1 His age .... color. 4 occupation Birthplace-City 4 State unce " Residence-Street No Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ... 4 color. occupation Birthplace Cit State " Residence-Street No City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mothes Date of this marriage Place of this marriage. Name and title of person R.R.7 1 Performing this marriage His address Name Witness é Address

FILED JUNET 1930 Men B Redat

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony terma and ana Groom's name Man 1222 His age " color.... s occupation " Birthplace-City State u Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 9 14 Maiden name of Mother an NAM Bride's name Her age.Y. " color.... occupation M Birthplace-City State 44 Residence-Street No City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father 18814 Maiden name of Ø 25 Cassal Date of this marriage. Place of this marriage Name and title of person Performing this marriage His address Name Witness Address

FILED JUN 241930 Slenn B Relation

1567 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name .. His age .... " color u occupation 12 " Birthplace-City State " Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriag Name of Father Maiden name of Mother Bride's name Her age. 4 color. occupation 0 Birthplace-City State " 2 " Residence-Street No. 2 City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. Ę Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address



1568

| Marriage Record for Board of Health |                                       |
|-------------------------------------|---------------------------------------|
| To Be Returned by Ministe           | r or Other Person Performing Ceremony |
| Larry Hudgoor Brook                 | they when sale abe grad               |
| Groom's name                        | 1 fudson Brooks                       |
| His age 21                          |                                       |
| " color ed                          |                                       |
| " occupation Zabor                  |                                       |
| " Birthplace-City.                  | yette State ala                       |
| " Residence-Street No.              | isulle city My                        |
| Single<br>Widower                   | 1st. 2nd or 3rd                       |
| Divorced                            | marriage                              |
| Name of Father                      | son ascorps                           |
| Maiden name of Mother               | via fremen                            |
| Bride's name Ida M                  | av Ill right                          |
| Her age 24                          |                                       |
| " color.ed                          |                                       |
| " occupation Marse                  |                                       |
| " Birthplace-City. alanta           | State                                 |
| " Residence-Street No. Carkoe       | in Mat City Supple                    |
| Single }                            | [1st, 2nd or 3rd]                     |
| -Divorced                           | marriage                              |
| Name of Father                      | mas Munight                           |
| Maiden name of Mother               | nang Sellers                          |
| Date of this marriage               | Quar 26-1931                          |
| Place of this marriage Sudawa       | ala Auto ala                          |
| Name and title of person            | B & minunally                         |
| His address Bindunaultin            | 1 bus                                 |
| 1                                   |                                       |
| Name                                |                                       |
| Witness Address                     |                                       |
|                                     |                                       |

FILED JUN 20 1930 Sena B Relita

m w

1569 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony ma and Groom's name His age ... и color. 4 occupation Birthplace--City An ountestate " Residence-Street No City Single Widowo 1st, 2nd or 3rd Divorcod marriage Name of Father Maiden name of Mother Bride's name Her age ... " color. 4 occupation Birthplace-City Stat и Residence-Street No. City Single 1st. 2nd or Srd Widow marriage Divorced 02 Name of Father Maiden name of Mother. Date of this marriage im anno Place of this marriage. 2 Name and title of person Performing this marriage 110 His address. Name Witness Address. woo Return this Report to County Clerk with License and Certificate



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name. All His age 0 3 color whill 4 occupation. dia Birthplace-City. State 44 Residence-Street No. Single 1st. Snd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ... vhi 4 color occupation Birthplace-City 4 Residence-Street No Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother vero Date of this marriage 21 Place of this marriage Name and title of person Performing this marriage His address 51. Name Witness Addres



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony ramas and as Groom's name His age ... color white 4 occupation 4 Birthplace-City State u Residence-Street No City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother 11 Bride's name Her age .... color white 4 au occupation ... 4 Birthplace-City Residence-Street No. 4 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

FILED JUN 201 1930

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony agon. Groom's name His age 3/ color white " les N " occupation 0 Birthplace-City " State " Residence-Street No. City Single Widower 1st, 2nd or Srd Divorced marriage Name of Father Maiden name of Mother an Bride's name 2 Her age color\_w mest occupation Birthplace-State 4 City Residence-Street No. ч City Single Ist. 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

FILED JUN 29 1930

Gener B Relation

1573

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony lace 1 7 11.01/ , ( llen et. Groom's name... - 05 His age are color. " occupation

Lo

marria

marriage

1st, 2nd or 3rd

State den

City

" Birthplace-City " Residence-Street No. Single

Widower Divorced Name of Father

"

Maiden name of Mother

Bride's name

Her age.

4 color.

- aa
- occupation 0. State " Birthplace

カ

City " Residence-Street No Single 1st, 2nd or 3rd

int

Widow Divorced Name of Father

Maiden name of Mother

Date of this marriage

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

Name

Address.

His address.

Witness



1574

| To Be Returned by Minister or Other Person Performing Ceremony |
|--|
| Clarence Snow alexander and June 16 thering 30 ellet           |
| Groom's name Clance Suns alexander                             |
| His age 24   |
| " color w l. t   |
| " occupation greenlance - laborer                              |
| " Birthplace-City 2 to State                                   |
| " Residence-Street No. 2118 5 E 10 th St. City Indiana for the |
| Single<br>Widower<br>Divorced } [1st, 2nd or 3rd<br>marriage   |
| Name of Father multand & Blance Cliff                          |
| Maiden name of Mother Beacher & other                          |
| Bride's name hat hat have Jallat                               |
| Her age 25.  |
| " color - slita  |
| " occupation Delphan Operator                                  |
| " Birthplace-City.   |
| " Residence-Street No.953 M1 Kingtons Scity Indianapolis and   |
| Single<br>Widow<br>Divorced                                    |
| Name of Father alfred John Sallists                            |
| Maiden name of Mother Junie million                            |
| Date of this marriage Dune 27th 1931                           |
| Place of this marriage Indian Chholis Ind                      |
| Name and title of person R. A. M. Ceann Ordained minister      |
| His address 234 n Deleward St                                  |
| Inglianegoolis Ind   |
| Witness Harris Rochville Per and thank                         |
| Batum this Papart to County Clark with License and Cartificate |

Marriage Record for Board of Health



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony magnet Ellen arthur Payton Barley and M Im Groom's name 2.0 His age. 7, 115 " color st occupation Qu. calk Birthplace State " " Residence Str City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 4 color. P inca occupation 4 Birthplace State 46 Residence-Street No. Single 1st, 2nd or 3rd Widow 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 Addres

Return this Report to County Clerk with License and Certificate

LEVEY PAINTING CO., IND'PLS. 27159 82-80



1576

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

| and  |
|--|
| Groom's name Buyers of the the the the   |
| His age  |
| " color  |
| " occupation & para time Contractor  |
| " Birthplace-City  |
| " Residence-Street No. 2/5/2 97 (Fine City   |
| Single<br>Widower<br>Divorced  |
| Name of Father   |
| Maiden name of Mother States Internal Manual In  |
| Bride's name   |
| " color  |
| " occupation   |
| " Birthplace— CityState  |
| " Residence—Street No.   |
| Single<br>Widow<br>Divorced  |
| Name of Father. Kannal Manager Willer  |
| Maiden name of Mother  |
| Date of this marriage June 27 1931<br>Place of this marriage unducune policy Jud<br>Name and title of person<br>Performing this marriage Res Maller Barmues_ |
| His address 4906 manlow are  |
| Indianupolis tus   |
| Name Mr & Mos Roy Wilke  |
| Witness Address. 4412 Baltimore Ceve Indraugpoliske  |
|  |



1577

| To Be Returned by Minister or Other Person Performing Ceremony  |
|---|
| and   |
| Groom's name for ge M Blake   |
| His age Fulenty Nine 1  |
| " color   |
| " occupation Electrition  |
| " Birthplace-City V190 CC State Ind   |
| " Residence-Street No City Dayton Oh  |
| Single<br>Widower<br>Divorced Ist, 2nd or 3rd<br>marriage   |
| Name of Father Ugene & Blake  |
| Maiden name of Mother Mumil Bundy   |
| Bride's name Lingra & Bouingn   |
| Her age Jury Engli  |
| " color While   |
| " occupation House Keefer   |
| " Birthplace-City. Montguny State Ohio  |
| " Residence-Street No. Pay tonCity Ohio   |
| Single<br>Widow<br>Divorced<br>Privor eld   |
| Name of Father Redward Dowman   |
| Maiden name of Mother Emma Rilly  |
| Date of this marriage afrene 27 - 1931  |
| Place of this marriage Mostinnville Ind<br>Name and title of person<br>Performing this marriage Elder Ji M. Bundy |
| His address Martin frachle and  |
| p p church of chros   |
| Witness Name Ray VI Jarcham.  |
| Address Accor Burdy   |
|   |

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



1578

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony       |  |
|---|--|
| Barker and Sisk   |  |
| Groom's name Raymond Wallace Barber   |  |
| His age 20 yrs. of age  |  |
| " color. white  |  |
| " occupation Pattern Maker  |  |
| " Birthplace-City_ Indianapolis State 9 rediana.  |  |
| " Residence-Street No. 804 No. Fleming City 9 ndiand polls.   |  |
| Single<br>Widower<br>Divorced June 1st, 2nd or 3rd<br>marriage  |  |
| Name of Father Robert Lewis Parky.  |  |
| Maiden name of Mother.  |  |
| Bride's name there many prise sist.   |  |
| Her age 19 years of algel.  |  |
| " color white.  |  |
| " occupation none.  |  |
| " Birthplace-City Mady mille State Untuchy  |  |
| " Residence-Street No. 32-3 Honoren and City Induna polls.  |  |
| Single<br>Widow<br>Divorced Ist, 2nd or 3rd<br>marriage Just  |  |
| Name of Father Thomas Rimp Lisk   |  |
| Maiden name of Mother. O'B Myan   |  |
| Date of this marriage   |  |
| Place of this marriage 904 No. Flimma St. Andrampoliz Inde<br>Name and title of person Per y rank M. Hoppen |  |
| His address 3 11 Dr. Barton are, Indrinapolis, Ind.   |  |
| Witness Name James Harrison July Sud  |  |
| Between this Persont to County Clark with Lisance and Coutifacts  |  |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name 24 His age Lu. ta. 4 color. hypician occupation pu Birthplace--City State 3 и Residence-Street No .. ena Single 1st, 2nd or 3rd Widowe Divorced marriage Name of Father Maiden name of Mother Bride's name un Her age. a color. occupation 4 Birthplace-City vu State orn " Residence-Street No. en City Single 1st, 2nd or 3rd Widow marriage Divoree Name of Father Maiden name of Mother. 4.1 Date of this marriage u Place of this marriage Name and title of person Performing this marriage His address Name / Witness ddress .

7'

FILED JUN 3 0 1930

Flem B Relation

1530

| To Be Returned by Minister or Other Person Performing Ceremony   |
|--|
| Ralph Clemens and Hestern Eastham.   |
| Groom's name Colphe Edward   |
| His age August 25, 1908, 72  |
| " color. U fit   |
| " occupation Jales man   |
| " Birthplace-City. Cumanta State   |
| " Residence-Street No. 607 7. Rural City Indinapolis   |
| Single<br>Widower<br>Divorced J. Lington [1st, 2nd or 3rd<br>marriage J. J. Lington                      |
| Name of Father C. Q. Clemense  |
| Maiden name of Mother Dance Metersay.  |
| Bride's name Kestelle. Easthann  |
| Her age autober 11, 1908 22  |
| " color. White   |
| " occupation designed  |
| " Birthplace-City MartinerelleState Rentuckey  |
| " Residence-Street No. 1448 Groff City Indianophis   |
| Single<br>Widow<br>Divorced. } [1st, 2nd or 3rd-<br>marriage } // wat                                    |
| Name of Father William Eastham   |
| Maiden name of Mother  |
| Date of this marriage. June 27, 1931   |
| Place of this marriage 1448 Frank<br>Name and title of person / Churce K. Black, dearon April 1990 Block |
| His address 1409 Wanner and Anne   |
| nilt & H   |
| Witness Address A & & Straff and   |
|  |

Marriage Record for Board of Health

FILED JUL 22 1981 Sterm 18 Rest.

1581

| To Be Returned by Minister or Other Person Performing Ceremony                                    |
|---|
| Frank Charler Darif, and Marion. Portex   |
| Groom's name Frank Charler Dank -   |
| His age   |
| " colorWhile  |
| " occupation Knitter 922al Silfs  |
| " Birthplace-City Franch Biefs State Jung   |
| " Residence-Street No. 430. Marrachutz City Jon Spils -   |
| Single<br>Widower<br>Divorced Smgl2- Ist, 2nd or 3rd Furth  |
| Name of Father Charler Dangs-   |
| Maiden name of Mother Saddig Wingen-  |
| Bride's name Marion Ports-  |
| Her age   |
| " colorWhile  |
| " occupation Szannatran ~   |
| " Birthplace-City. ISrrz Haulz State And-   |
| " Residence-Street No. 23 8 8, M. Al Sasborn City_ 2 - Alo  |
| Single<br>Widow<br>Divorced Single Ist, 2nd or 3rd<br>marriage                                    |
| Name of Father BErch Porter   |
| Maiden name of Mother Eda. WETTETS baugh.   |
| Date of this marriage Jun 2 - 27. 1931-   |
| Place of this marriage B345 N. Colinada A<br>Name and title of person Minerter Prev. W. a. FiryE- |
| His address 3618 E. 30 shi Indolis Um 2.  |
|   |
| Name Alter + Mas Alm O Hartup   |
| Witness Address 3345 dr. Coloradio  |
|   |

Marriage Record for Board of Health

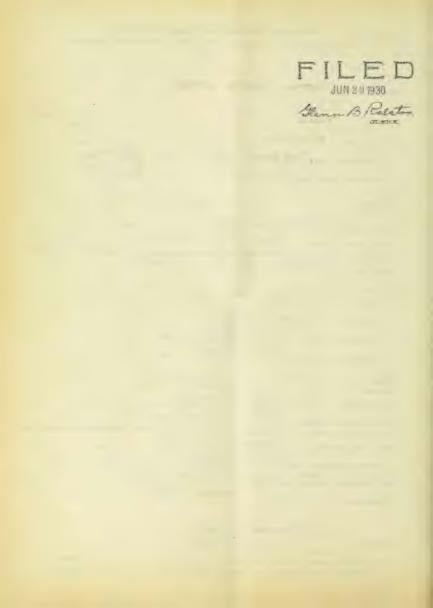
FILED JUNEM 1930 Stenner / B. Reestin

.

1582

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

Harmon Levois Stake Groom's name 20 His age. mesta u color. occupation Birthplace State " Residence-Street No City Single Widowa 1st. 2nd or 3rd marriage Divorced Ch. 114 Name of Father. Maiden name of Mother arkvolndry Bride's name Her age. 4 color 10/14/2 mau occupation " Birthplace-State Dul Residence-Street No. " City Single Widow 1st, 2nd or 3rd marriage Divorced 41 n Name of Fathe val. Maiden name of Mother JI Date of this marriage. Place of this marriage. Name and title of person Performing this marriage His address Francisa Name Witness 1135



1583

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

.and \* Daley Groom's name 22 His age " color. uctor " occupation Birthplace " City " Residence-Street No. Single 0 Widower 1st, 2nd or 3rd Divorced mai Name of Father Maiden name of Mother N 111 Bride's name Her age " color 0 4 occupation " Birthplace-State City a " Residence-Street No. City Single Widow 1st, 2nd or 3rd marria 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 dres Return this Report to County Clerk with License and Certificate

FILED JUN: 11/1930 Stenn B Reatin

1694

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony ildred top .and// Groom's name

State

His age ...

11

" color.

- " occupation
- " Birthplace-City

n1.

" Residence-Street No 2 v 19 City Single 1st, 2nd or 3rd Widower Divorced marriage

Name of Father

Maiden name of Mother

Bride's name

Her age ...

- " color.
- occupation
- Birthplace-City State 4
- rec " Residence-Street No. City

Single 1st, 2nd or 3rd Widow> marriage Divorced Name of Father

This

Maiden name of Mother.

Date of this marriage in Place of this marriage.

Name and title of person Performing this marriage.

0) His address.....

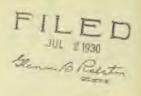
|         | Name aques Fries            |
|---------|-----------------------------|
| Vitness | Address 3/2 E. Suithand any |
|         |                             |

FILE JUN 21 1930 Stenn B Red

1585

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

and Groom's name His age 26 4 color occupation Birthplace-State 4 " Residence Stre Cita Single Widower 1st. 2nd or 3rd Divorced Togrriage Name of Fathe Maiden name of Mother Bride's name Her age ... color..... occupation Birthplace-Citys State 44 8 Residence-Street No. 2 9 4 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 2.9 Name and title of person Performing this marriage His address. Name Witness Addres



1586

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |                     |  |  |  |
|---|---------------------|--|--|--|
| hilliam Felk an   | Margaret Weston     |  |  |  |
| Groom's name William 7  | elk.                |  |  |  |
| His age 55  |                     |  |  |  |
| " color White   |                     |  |  |  |
| " occupation Grocer   |                     |  |  |  |
| " Birthplace-City handhester  | State_ marifand     |  |  |  |
| " Residence-Street No. 1617 Was   | leCity              |  |  |  |
| Single<br>Widower<br>Divorced   | Ist, 2nd or 3rd     |  |  |  |
| Name of Father  | n't                 |  |  |  |
| Maiden name of Mother   | Muler               |  |  |  |
| Bride's name margaret   | weston              |  |  |  |
| Her age   |                     |  |  |  |
| " color while   |                     |  |  |  |
| " occupation house keeper   | Q                   |  |  |  |
| " Birthplace-City   | State State         |  |  |  |
| " Residence—Street No. 1617 10  | City City           |  |  |  |
| Single<br>Widow   | 1st, 2nd or 3rd     |  |  |  |
| Divorced  <br>Name of Father  | Hattabaugh          |  |  |  |
| Maiden name of Mother Marry   | Jan Waddle.         |  |  |  |
|   | 1 1921              |  |  |  |
| Date of this marriage   |                     |  |  |  |
| Place of this marriage  | V Seng, minister    |  |  |  |
| His address 2753 Barth  | ave . ,             |  |  |  |
| Idianafot   | is Jud.             |  |  |  |
| Name Blanche  | Seng                |  |  |  |
| Witness Address 2753 Ba   | rth dry Andrangolit |  |  |  |



1587

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony                |  |  |  |  |
|--|--|--|--|--|
| asseph Doldsmith and Siggie & Coule  |  |  |  |  |
| His age 81   |  |  |  |  |
| " color white  |  |  |  |  |
| " occupation<br>" Birthplace-CityMamilton City_State_ Ind  |  |  |  |  |
| " Residence-Street No. Fortavill City Jud  |  |  |  |  |
| Single     Nicore       Widower     Nicore       Divorced     Nicore   |  |  |  |  |
| Name of Father Saltamith   |  |  |  |  |
| Maiden name of Mother  |  |  |  |  |
| Bride's name Augzin & Lawle  |  |  |  |  |
| Her age 6/   |  |  |  |  |
| " color_while  |  |  |  |  |
| " occupation & Kausewife   |  |  |  |  |
| " Birthplace-City Hummen City State  |  |  |  |  |
| " Residence-Street No. / 9. 6 8 Marconce City  |  |  |  |  |
| Single   |  |  |  |  |
| Name of Father lo hus Adversterk   |  |  |  |  |
| Maiden name of Mother Francis M. Shearen   |  |  |  |  |
| 0  |  |  |  |  |
| Date of this marriage  |  |  |  |  |
| Place of this marriage Quality applies Surf<br>Name and title of person<br>Performing this marriage game & Manuny go |  |  |  |  |
| His address Indranafratis Ind  |  |  |  |  |
| [ Name   |  |  |  |  |
| Witness Address  |  |  |  |  |



568

To Be Returned by Minister or Other Person Performing Ceremony -1. ast. Beec and Groom's name His age. 44 color... occupation. in isiner 4 State. 4 Birthplace-City Residence-Street No Jule City " udia -Single Widower -1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age 4 color. occupation 4 4 Birthplace-City State L. ч Residence-Street No. 3 with .City Single 1st, 2nd or 3rd Widow and and marriage Divorced Name of Father, Maiden name of Mother. ensois 3 Date of this marriage. France Place of this marriage Name and title of person Performing this marriage His address 100 Name Witness Address

FILED JUN 210 1930 Stenne B Releton

To Be Returned by Minister or Other Person Performing Ceremony William lo anderti. and Groom's name li ille 10 Harde 26 His age..... " color. La 4 occupation 4 Birthplacedianappe State -City а Residence-Street No. N City Single Widowe**r** 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother race Bride's name 8 Her age. " color OK M M 4 occupation NOI Birthplace-City State 4 Residence-Street No. " City Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father... Maiden name of Mother. erc 3 9 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

1589

FILED JUN 201930

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Wilbur Joseph Killianand let Geneva Richardo Shillin oseph bur Groom's name. His age ... hit. color. Mnitter occupation. lisua autte Birthplace State arseval ave 1213 ianapoli; 4 Residence City Single 1/27 1st. 2nd or 3rd marriage Tilli Name of Father. Mother Maiden name of Pirkardo iolit Bride's name. Her age Whit. color Transfer Cles occupation bocut. in State 4 Birthplace E. 59 th 4 City. 4 Residence Single 1st, 2nd or 3rd Ist marriage ru a Name of Father anna. Maiden name of Mother. king 193 Date of this marriage udiano 2200 aug Place of this marriage. Name and title of person Re Performing this marriage 0 His address eau apoli Name Witness hidiana



To Be Returned by Minister or Other Person Performing Ceremony thatha Buder albed Kala and. thed Kup Groom's name His age 40 color while Horisk occupation angenzalia Birthplace-State Capilol City Residence-Street No. Single 1st, 2nd or 3rd Widower Divorced marriage ich Name of Father. ou Maiden name of Mother. saria/ maithe Bender Bride's name. Her age. whilecolor... dies occupation. Birthplace-City 4 State how " Residence-Street No. Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father. August Emelia Maiden name of Mother ann 931 Date of this marriage... de anali Place of this marriage. Name and title of person di Asumis ana Performing this marriage din His address d she Mille Name Witness 200 month este 15 Address.

1591



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Ceci Mani and ahr Groom's name 21 His age ... 4 color. CI 4 occupation 11-Birthplace State 4 Residence Ц City Single Widower Ist. 2nd or and Divorced marria Name of Father Maiden name of Mother Bride's name Her age. 4 color a 4 occupation " Birthplace-City State Residence-Street No. " City Single 1st, and or ard Widow marriage Divorced Name of Father. Maiden name of Mother Date of this marriage Place of this marriage... Name and title of person es. Performing this marriage. n 10 His address V Name Witness Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and rari. 0 Groom's name. His age. " color. occupation Birthplace City St 08 " Residence-Street No. Single -Widower 1st, 2nd or 3rd marriage Divorced Name of Fathe Maiden name of Mothe Ø Bride's name Her age. 4 color. 4 occupation Birthplace " ч 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 M Performing this marriage His address Name. Witness

FILED JUN 20 1930 General Rabits

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

and Groom's name Sunce Mich on His age 2 2 " color. Julit occupation .... Lan 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. 4 color occupation my 4 anlo 4 Birthplace-City. State " 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. 2181 03 Witness ddre Return this Report to County Clerk with License and Certificate

LEVEN PRINTING CO., IND'PLS. 27159 \$2-80



1595

| To Be Returned by Minister or Other Person Performing Ceremony   |
|--|
| Foy Harold Mendenhalled Elizabeth Louise Augon   |
| Groom's name Ing Ararold Mendenhall  |
| His age  |
| " color  |
| " occupation sulesman  |
| " Birthplace-City_ Westfield_ State_Indiana_   |
| " Residence-Street No. 6159 Broudway City Indianabolis   |
| Single<br>Widower<br>Divorced J. First<br>Name of Father, Fred Mandana and   |
| And of a day of the second sec |
| Maiden name of Mother. Cuta Drallann   |
| Bride's name cligabeth Tourse Dugan  |
| Her age  |
| " color_White  |
| " occupation Strangrapher  |
| " Birthplace-City ? undranie State Indiana   |
| " Residence-Street No. 10159 Charadany City Indianapolis   |
| Single<br>Widow<br>Divorced List, 2nd or 3rd<br>marriage First   |
| Name of Father Groups advert Dugan   |
| Maiden name of Mother Mellie Sanda   |
| Date of this marriage June 27 1931.  |
| Place of this marriage Parsonage - 1918 & Raymond Pudianapoli  |
| Parte and title of person<br>Performing this marriage Now and all catter Minister  |
| His address 1018 C. Maymond St.  |
| Judainakolis, and  |
| Name Mrs. 24. M. Pattism   |
| Witness Address , 218 E. Raymond, Jandismicholis   |

FILED JUN 30 1930 Stenn B Reeston

514

| To Be Returned by Minister or Other Person Performing Ceremony |     |
|--|-----|
| Horace Winchell Manual and the Plice In mon                    |     |
| Groom's name Housel Winchell Marcan                            |     |
| His age  |     |
| " color  |     |
| " occupation Whidear   |     |
| " Birthplace-CityStateState                                    | 0   |
| " Residence-Street No. 7 417 City City                         | 7., |
| Single   |     |
| Name of Father   |     |
| Maiden name of Mother  |     |
| Bride's name   |     |
| Her age  |     |
| " color  |     |
| " occupation fton and  |     |
| " Birthplace-City State State                                  |     |
| " Residence-Street No. 4522 Marchance City                     | 2   |
| Single<br>Widow.<br>Divorced.                                  |     |
| Name of Father // 112 tarvio USAN                              |     |
| Maiden name of Mother fiere Beating                            |     |
| Date of this marriage  |     |
| Place of this marriage   |     |
| His address  |     |
| ean S. higher mainsting on                                     |     |
| Name Holaclican  |     |
| Witness Address 60 3 Hourse Mancar Toda Julianaf.              | le  |

Return this Report to County Clerk with License and Certificate

A

FILED JUIN 201030 Henry 13 Reesting

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony enge Marcaland hina ardith Dee HAM R Devigt Marcore Groom's name His age " color 44 occupation Birthplace-City 4 State ш Residence-Street No. 1 Cit Single Widower an 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age 1 " color occupation Birthplace-City State " 01 " Residence-Street No. Single Widow 1st, 2nd or 3rd Suclory marriage Divorced 70 Name of Father Maiden name of Mother 2an Date of this marriage... Place of this marriage, Name and title of person Performing this marriage. His address Name. raque Witness Address

FILED JUN 21/ 1930 Semm B Roderton

1578

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Loom and 1 Fuch Groom's name. His age. Innins " color. occupation. 223 m Birthplace-City .. " State Residence-Street No ... City 4 Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. u color... occupation Birthplace " ada. " Residence Street City en 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 His address 1 Nan Witness 516 Address

FILED JUN 201930

1599

| Marriage Record for Board of Health   |  |  |  |  |
|---|--|--|--|--|
| To Be Returned by Minister or Other Person Performing Ceremony  |  |  |  |  |
| (IN VI all Val II and MI a line   |  |  |  |  |
| Synamore floor metal Overa maak genmen  |  |  |  |  |
| Groom's name Millend Mileliel   |  |  |  |  |
| His age thirty hus (22)   |  |  |  |  |
| " color   |  |  |  |  |
| " occupation. Street Car cherenter  |  |  |  |  |
| " Birthplace-City Broughton State Ill   |  |  |  |  |
| " Residence-Street No. 1427 Ballyonde City Inchangeling   |  |  |  |  |
| Single<br>Widower<br>Divorced Units, 2nd or 3rd<br>marriage   |  |  |  |  |
| Name of Father Januer Fr, Mitchell  |  |  |  |  |
| Maiden name of Mother Mary & Renfvor  |  |  |  |  |
|   |  |  |  |  |
| Bride's name Mar Jahnson  |  |  |  |  |
| " color. White  |  |  |  |  |
| " occupation House Kasper   |  |  |  |  |
| " Birthplace-City Blueston State Kenterly   |  |  |  |  |
| " Residence-Street No. 2609 Proofcuilcity Inchanapolis  |  |  |  |  |
| Single<br>Widow<br>Divorced State St, 2nd or 3rd<br>marriage Accord                                       |  |  |  |  |
| Name of Father Marin B Jahnson  |  |  |  |  |
| Maiden name of Mother Eva Ellen Many  |  |  |  |  |
| A 1981  |  |  |  |  |
| Date of this marriage (funce & 17)  |  |  |  |  |
| Place of this marriage II fortante Ind.<br>Name and title of person Withaw f. Whitaker, Justice of Person |  |  |  |  |
| His address ME Corlbuille Ind R. F. K.  |  |  |  |  |
|   |  |  |  |  |
| Name Paul & Whitakin  |  |  |  |  |
| Witness Address M. Econdwille and R. F. L.  |  |  |  |  |
| Return this Report to County Clerk with License and Certificate   |  |  |  |  |

LEVEN PRINTING CO., IND'PLS. 27159 52-80



600

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

and Vile itell ann Groom's name.. His age .... color 4 vinciper occupation. auch fort State 4 Birthplace-City. the Residence-Street No. 413 n 12 City " Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father. Maiden name of Mother. er Bride's name E etap dre Her age ..... 20 color tuhila occupation salestady Birthplace-City Maduan " 0. State. diand Residence-Street No. 3 u lenver City. Single 1st, 2nd or 3rd Widow End marriage Divorced Name of Father E CA Maiden name of Mother. Date of this marriage change Place of this marriage Name and title of person Q.C. Performing this marriage His address · ar Bell Name Witness Address

FILED JUN 2:11930 Genne B Paliton

1601

| Marriage          | Record      | for Board    | of Health      |       |
|-------------------|-------------|--------------|----------------|-------|
| To Be Returned by | Minister or | Other Person | Performing Cer | emony |

| and  |
|--|
| Groom's name Grant Juther Mueller                                    |
| His age 23   |
| " colorWhite   |
| " occupation   |
| " Birthplace-City Cahland State Col                                  |
| " Residence-Street No. & 4 4 N. Kupto City Indianafolis              |
| Single<br>Widower<br>Divorced 100 100 110 110 110 110 110 110 110 11 |
| Name of Father Time August Mueller                                   |
| Maiden name of Mother Caroline Schoettle                             |
| Bride's name Freda Evelyn Ellistt                                    |
| Her age  |
| " color While  |
| " occupation   |
| " Birthplace-City Casletan State Ind                                 |
| " Residence Street No. 3704 E. M. M. City Indianaparab               |
| Single [1st, 2nd or 3rd ] Trush                                      |
| Divorced mairiage R. Elliatt   |
| Name of Father   |
| Maiden name of Mother. Alament V. Reselving                          |
| Date of this marriage June 27, 1931                                  |
| Place of this marriage 3704 E. Hur york                              |
| Name and title of person & East Jones, Minister                      |
| His address 312 h. Calif. Indianafulio                               |
| and the of an Il   |
| Witness Name M. alliam fr. Mullia<br>Address & J. A. R. exectore     |
|  |
| Return this Report to County Clerk with License and Certificate      |

LEVEY PRINTING CO., INDIPLE. 27868 82-80



602

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

and. ro Groom's name His age 6 " color ac 4 occupation " Birthplace State 6 Residence-Street No 5 8 an 4 litv Single v Widower 1st, 2nd or 3rd Divorand marriage Name of Father Maiden name of Mother. Bride's name Her age 4 color 00) occupation 0 er State Ц Birthplace 44 Residence -Street No Single 1st, and or an 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

FILED JUN MI 1930 Glenn B Redston There

1603

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

hy. ttank A. and / 0 Groom's name His age. " color. occupation Birthplace State 4 Residence Street N City Single 1st, 2nd or Divorced marriage Name of Fathe Maiden name of Mother Bride's nam Her age... 4 color 4 occupation " Birthplace 4 Residence -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 addre Name Witness Sh. Dacturia Address



1604

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

and Nurle MAR U Groom's name His age 4 color man 4 occupation 4 Birthplace -Cit: State 4 Residence Street No City Single Widowe 1st, 2nd or 3rd Divorcedmai Name of Father Maiden name of Mother lu me ina 10 ã Bride's name Her age. 4 color 101110h occupation Birthplace 4 " Residence-Street No. City Single Widow 2 1st, 2nd or 3rd Divorced Name of Fathe 0 Maiden name of Mother. 3. Date of this marriage Place of this marriage. Name and title of person Performing this marriag His address Name Witness

FILED JUN 21/1930 Stenne B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Thomas issue noblett and murcel Ma aoner ssus nus Groom's name. an Z His age. White 4 color. 4 occupation slass in 4 Birthplace City State 4 Residence Street No. 100 City Single Les. Widower 15 1st, 2nd or 3rd Divorced marriage nas Name of Father 1 Kuchan Maiden name of Mother wi a Bride's name Her age. color occupation Birthplace State " 6400 30 4 n Residence-Street No. Single 1st, 2nd or 3rd inst Widow marriage Divorced Name of Fathe Maiden name of Mother 17 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Name Witness Addres

1605

FILED JUN 30 1930

1606

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony off. 0 otters Groom's name И 2 His age. loved 4 color occupation lini Birthplace-City State 4 Residence-Street No. и City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father ann Maiden name of Mother moore Bride's name Her age stand " color. occupation 4 " Birthplace-City State Residence ious 4 -Street No. aunitre and City Single Secon 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother. in Date of this marriage Eng Place of this marriage 151 Name and title of person ro NA Performing this marriage His address in In alas Name Witness Your Address



1607

To Be Returned by Minister or Other Person Performing Ceremony mederer ook and an cell 11 Groom's name His age ..... " color. VAL 8 occupation 4 Birthplace-City 4 State Residence-Street No 1 . 3 " .Citv Single 1st, 2nd or 3rd Widower Divorced marriago Name of Father Maiden name of Mother. Latine 1 Bride's name Her age " color.... occupation 44 Birthplace-City. State ZIK Residence-Street No. City. " Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father e Maiden name of Mother..... Date of this marriage Place of this marriage... Name and title of person Performing this marriage His address. 2 Name Witness

Marriage Record for Board of Health

FILED JUN 29 1030 Sen B Restm

609

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

and Dellique RI 1110 Groom's name His age. " color. occupation usclaude Birthplace-City. mole main State 4 4 Residence-Street No utaine City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Dise PT Clisabe Maiden name of Mother Bride's name il Her age. 4 color. occupation Birthplace 4 State 44 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 1) Performing this marriage nl. In His address Name Witness Return this Report to County Clerk with License and Certificate



1609 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name B His age .... 4 color. occupation. 4 61 1 Birthplace-City. State Residence-Street No. 2363 " and City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name 1 11 Her age 23 10 " color. sower occupation Birthplace-City State 1620 6 Residence-Street No ... а City Single 1st, 2nd or 3rd Widow ang marriage Divorced cken Name of Father 8 Maiden name of Mother.. 3 Date of this marriage Place of this marriage. Name and title of person Performing this marriage 3 4 His address Name. Witness Address.



1610

To Be Returned by Minister or Other Person Performing Ceremony and Groom's name. His age ... ear 4 color. 61 occupation Birthplace-City. 4 State 22. 0 mer City: " Residence-Street No Single Widower 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. nd Bride's name rel Her age. 4 color ... perata occupation 5 Birthplace-State 12 - City h 4 Residence-Street No Single 1st. 2nd or 3rd Widow marriage Divorced Name of Father mary Maiden name of Mother. Cune Lernty reventle 01 Date of this marriage. Place of this marriage .... Klecono en Name and title of person ter. . 6 Ruch a min Performing this marriage. reit 15 wich reliand His address he itw . N Wartu . (o . ma Name Witness ence Address

Marriage Record for Board of Health



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 1 Groom's name His age. w te ч color. 4 occupation 0 Birthplace-City. State 4 Residence-Street No City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father. Maiden name of Mother a Bride's name Her age. to. los " color. 4 occupation 4 Birthplace-City State leal) и Residence-Street N 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



1612

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Frank W. Schuve and Carley Redding Mark   |
| Groom's name Frank Ur. Schinoe  |
| His age 31  |
| " color. White  |
| " occupation. Salesiman   |
| " Birthplace-City She/by Yill e State Ind.  |
| " Residence-Street No. 62 17. Stremman Dr. City Indpls.   |
| Single<br>Widower<br>Divorced Sine /e [1st, 2nd or 3rd ] First  |
| Name of Father Chas. Schinoe  |
| Maiden name of Mother. 43415a R112c   |
| Bride's name Carley Redding Mack  |
| Her age 2/  |
| " color White   |
| " occupation Stendo rapher  |
| " Birthplace-City FBra, State Ind.  |
| " Residence-Street No. 2225 Applesate City Indpls.  |
| Single<br>Widem<br>Divorced States and Second   |
| Name of Father Z. A. Redduige   |
| Maiden name of Mother Sarah Disher  |
| Date of this marriage June 27/31  |
| Place of this marriage 3/3 A. Grantan.  |
| Name and title of person<br>Performing this marriage<br>Rev- Ablak                                    |
| His address. 3/3 M- Grant   |
| O C II  |
| Witness Name no golate  |
| Address 3/3 1. Search and   |

V :



1613

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age и color B 11 occupation Birthplace-State -City 2 Residence-" Street .City Single Widower 1st, 2nd or 3rd Divorced marriage. Name of Father Maiden name of Mother Bride's name 40 Her age. 4 color 4 occupation Birthplace-City State 1 Residenceи -Street No .City Single 1st, 2nd or 3rd Widow marriage Divorced A 11 Name of Father ann Maiden name of Mother. 3 1 Date of this marriage Ta 1 Place of this marriage Name and title of person Performing this marriage 0 His address Name Witness asim Address



1214

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

| and   |
|---|
| Groom's name faul & williamso   |
| His age   |
| " colorClife  |
| " occupation lactory worker   |
| " Birthplace_CityChengersState  |
| " Residence-Street No. 1226 Array Core City Public apple  |
| Single<br>Widower<br>Divorced later |
| Maiden name of Mother   |
|   |
| Bride's name Convelley  |
| Her age   |
| " colorlite   |
| " occupation stempsplace  |
| " Birthplace-CityState  |
| " Residence-Street No. 7.6.7. City.   |
| Single<br>Widow<br>Divorced   |
| Name of Father  |
| Maiden name of Mother   |
| Date of this marriage   |
| Place of this marriage  |
| Name and title of person 24.0 Rolling ministry  |
| His address Midliangthin Trid. R.R. H. 107 157  |
|   |
| Witness Name Let Torats<br>Address 14411 Windley and  |
|   |

FILED JUN 24 1930

1615

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Svin O, Wilson and Ida Lombard  |
| Groom's name O. Wilson  |
| His age 39  |
| " color   |
| " occupation geresty per  |
| " Birthplace-City Daws State Ohio   |
| " Residence-Street No. R. 1224 Broadily City Lidianofil's   |
| Single<br>Widower<br>Divorced June (1st, 2nd or 3rd<br>marriage                                       |
| Name of Father Thomas Dison   |
| Maiden name of Mother Mary Ella Colim   |
| Bride's name Ida Loubard  |
| Her age   |
| " color While<br>" occupation Topker In Malthews My 8, 60,  |
| " Birthplace-City Indianofic State July<br>"Residence-Street No/ 827 Hoy City Indianofic's            |
| Single<br>Widow<br>Divorced Single Ist, 2nd or 3rd<br>marriage June 1                                 |
| Name of Father _ tohn Ambaug  |
| Maiden name of Mother Marganer Louise & awley   |
| Date of this marriage   |
| Place of this marriage of 2 Hoyf were, Signature of person Performing this marriage Revi A. E. Clern  |
| His address 384 A daws ave, here, duch  |
| Witness Name & Frence Frey<br>Address 2916 Paris fore Indiancefolio Fuel                              |
| Between this Benerit to Country Clash with Lisense and Coutificate                                    |

FILED JUN 2 1930 Stenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Inen 60 t and room's name His age ... " color и occupation Birthplace-City State 4 и Residence-Stree City Single 1st. 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 4 color. occupation " Birthplace-City State Residence-Street No 4 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



6.17

To Be Returned by Minister or Other Person Performing Ceremony un Snider and Groom's name. His age .... " color... le occupation. Birthplace-City MADA State Cinan ana 1605 Wa " Residence-Street No. de City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother inder PIN) Bride's name Her age ... 4 color occupation " Birthplace-City Residence-Street No. Emm ч 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

FILED JUN 30 1930 Slenn B Paeston JUN 20 1930

arine Ceu Clever rechman and Val Cerohua Groom's name. min His age ..... " color # ti he occupation. " Birthplace-City State " Residence-Street No Single Widower 1st, 2nd or 3rd marriage -Divorced Name of Father Maiden name of Mother aria Bride's name Her age. " color. occupation " Birthplace-City State Residence-44 -Street No Cit 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 Jame Witness 2001 ddre

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

1618



1619 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name. 22 His age " color. 4 ч occupation Birthplace-City State " Residence-Street City Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother Bride's name d Her age V. " color. 4 occupation 46 Birthplace State – City u 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 - end

FILED JUN 201930 Stenne B Reaton

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony austin Ra all Gillisfine and Weary Groom's name ... His age ... holite 4 color. Ka occupation esmo Washin " Birthplace State Residence-Street No. 701 4 Single Widower 1st, 2nd or 3rd Divorced marriage Je Name of Father Maiden name of Mother. Ture 1 WE Bride's name. ann 2.5 Her age. 4 color occupation the d State " Birthplace Residence--Street No. 411.N 600 " .City in Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father. Maiden name of Mother. Date of this marriage. m . 143 Place of this marriage. Name and title of person Performing this marriage. .u.m. 329 His address. + in 6 Weer Name Witness Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Kin and .ea Groom's name His age ... color occupation Birthplace " -City State. " Residence -Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 44 color. 4 occupation Birthplace 4 - City State 4 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 Minister or Other Person Performing Ceremony hn Marguin aler lass, and arquis Groom's name His age 8 " color Incian occupation " Birthplace State -Citv Residence nalislas " Single Widower 1st, 2nd or 2rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age. 0 4 color. 4 occupation eller. Birthplace " State City ч Residence Street Single 1st, 2nd or 3rd Widow 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 11 mm His address. 11 Name. Witness Address Return this Report to County Clerk with License and Certificate



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

and essel Groom's name. His age. " color..... U occupation Lann 4 Birthplace-City State 4 44 Residence-Street No. City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother Bride's name Her age. " color. 6 occupation 4 Birthplace-City State и Residence-Street No Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother 93 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



1624

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Fine Morriand o HARU yno m Groom's name. His age. " color occupation fum 4 94 mon " Birthplace-City. State " Residence-Street No. City Single Widower 1st. 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. 16 Bride's name TThe ce Her age. " color occupation 4 Birthplace-City NO State 4 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 Minister or Other Person Performing Ceremony mand U Cin Groom's name. 4 His age White " color... occupation ... oman " 1900 montaustate OX " Residence-Street No. 1904 Single Widower 1st, 2nd or 3rd Divorced marriage unli Name of Father Maiden name of Mother Bride's name w Her age color... " " occupation. Birthplace-City. unda ч State ano R " Residence-Street No 2 Jun City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father 1 nok Maiden name of Mother. es 202 June 2 8 Date of this marriage. Place of this marriage. Name and title of person Performing this marriage 111 1 33 His address Name Witness am 1328 Address Return this Report to County Clerk with License and Certificate



1626

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and an Groom's name His age 0 hill color w occupation Birthplace-State Residence-Stree City Single Am 1st, 2nd or 3rd Widower Divorced marriage Name of Father a Maiden name of Mother un Bride's name Her age ... color white ist lup occupation. Birthplaceand/s State Residence-Street No. on. City Single Widow Angl 1st, 2nd or 3rd na marriage Divorced ew Name of Father Maiden name of Mother. as 14 Date of this marriage 11 Der Place of this marriage. Name and title of person Performing this marriage His address.... 11 nalazza Emma M Name 7 Witness best

4

u

4

4

"

FILE JUL 11930 Glenn B Red

1:27

| Marriage Record              | for Board      | of Health           |
|------------------------------|----------------|---------------------|
| To Be Returned by Minister o | r Other Person | Performing Ceremony |

| Proc Richard and Dulla Smith  |
|---|
| Groom's name.   |
| His age   |
| " color   |
| " occupation let main   |
| " Birthplace-City_udellState  |
| " Residence-Street No.  |
| Single<br>Widower<br>Divorced } Ist, 2nd or 3rd<br>marriage }   |
| Name of Father Plante Price manda   |
| Maiden name of Mother   |
| Bride's name  |
| Her age   |
| " color_eolored   |
| " occupation  |
| " Birthplace-CityState  |
| " Residence-Street No. 445 chapilaCity Indianapoles   |
| Single Widow Divorced List, 2nd or 3rd marriage   |
| Name of Father Amazing  |
| Maiden name of Mother   |
| Date of this marriage<br>Place of this marriage<br>Name and title of person<br>Performing this marriage<br>His address. / D / 8 M. Jacutane |
|   |
| Witness { Name_Marie_Richmond_  |
| 1 0   |



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Aleun D. Shu Lucille 11 aller and There do Groom's name 11000 His age. color. L occupation. Birthplace-City. " Stafe " Residence-Street No City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father ma Maiden name of Mother Bride's name Her age. 4 color..... occupation. Birthplace-City. 4 " 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 Vame Witness sna



1629

To Be Returned by Minister or Other Person Performing Ceremony Leoguet ecus they and mand 101 ce siller Groom's name His age. 4 color. occupation County State Cheo adams Birthplace-City. her Residence-Street No. 6 " City Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father call Maiden name of Mother Bride's name Her age. lute 4 color ronascher occupation Birthplaceen State City U damo City π Residence-Street No. 6 Single 1st, 2nd or 3rd Widow male 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 tan His address Name Witness ddress 2/

Marriage Record for Board of Health

FILED JUN 30 1930 Stenn B Relation

CT. FLX

1630

To Be Returned by Minister or Other Person Performing Ceremony mark C. aula and Groom's name His age ... ч color occupation " " Birthplace-City 7 " Residence-Street No. City Single 1st, 2 Witt Th marriage Name of Father Maiden name of Mother Bride's name Her age 4 color. 11215/0 Ph occupation " Sales State ч Birthplace - City 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. 12 h rill Name. Witness n

Marriage Record for Board of Health



1621

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

and Groom's name ester even an 2 His age ..... 4 " color. N occupation Birthplace-City / State Residence-Street No. City 4 Single 1st. 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother. vere te Bride's name Her age. it 4 color. isicia occupation Birthplace-City State 4 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

JUN 160 193 an and

1632

1.1

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Swelffeury Wald and Dorothy neg Reininger   |
| Groom's name Herry Halle  |
| His age   |
| " color   |
| " occupation Real field kuitte  |
| " Birthplace-City Haucock State State   |
| " Residence-Street No. /2.25 / Alali City Instancefold  |
| Single [1st, 2nd or 3rd ] /2/   |
| Name of Father Carly Halsh  |
| Maiden name of Mother. Ala . Mutchell   |
| Bride's name Dorothy May Peissingen   |
| " color White<br>" occupation Realfield & Transfer Dept)  |
| " Birthplace-City Subraucholis State State  |
| " Residence-Street No. 551 N-Plural City Sularcapolit   |
| Single [1st, 2nd or 3rd ] / A ,<br>Divorced [1st, 2nd or 3rd ] / A ,                                  |
| Name of Father. Alls L, Keiseuge  |
| Maiden name of Mother. All Heury  |
| Date of this marriage Access 2/8 - 1931-  |
| Place of this marriage Andrease polles<br>Name and title of person<br>Performing this marriage        |
| His address   |
| Witness Name Jasil Walsh 1619 Seullar Ang   |
| Address   |

FILED

Genn B Ratiton

10

1633

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

| Groom's name Quilling   | Audrew Afexander of and Restino Bond                          |
|--|---|
| * color & A * occupation   | Groom's name Quidrew alexander                                |
| * occupation without State Alberty A * Birthplace-City. Sector State Alberty A * Residence-Street No. 72.1 Eliforma City Judana July Single Widower J. Latter And Market A Name of Father Data Anguetta Pride's name. Attil and Anguetta Birthelace-City Judana Anguetta * color LA * color LA * a color LA * a color LA * a color LA * Birthplace-City Judana Anguetta Birthplace-City Judana Anguetta * a color LA * a color LA * a color LA * a color LA * Birthplace-City Judana * State Judana * Birthplace-City Judana * Birthplace-City Judana * Birthplace-City Judana * Birthplace-City Judana * State Judana * Name of Father No. R. P. State Judana * A color LA <td>His age 24</td>  | His age 24  |
| * Birthplace-City  | " color_end   |
| * Residence Street No. 121 Blog man. City. Judway days. July<br>Widower<br>Diversed   1st, 2nd or 3rd<br>marriage<br>Name of Father. Day Anyway<br>Maiden name of Mother. Sum a Anyway<br>Maiden name of Mother. Sum a Anyway<br>Her age<br>23<br>* color AA<br>* occupation. Junway<br>* color AA<br>* occupation. Junway<br>* Birthplace-City. Munuel<br>* Residence-Street No. 2 State. Sum<br>* Residence-Street No. 2 Subject of City. State. Sum<br>* Residence-Street No. 2 Subject of City. State.<br>* Introduced International City. State.<br>* Introduced International City. State.<br>* Introduced International City.<br>* Mane of Father.<br>* Maiden name of Mother.<br>* Sum And Angel<br>* Sum And State.<br>* Sum And State.               |   |
| Single<br>Widower<br>Diversed<br>Maiden name of Mother<br>Maiden name of Mother<br>Maiden name of Mother<br>Maiden name of Mother<br>Maiden name of Mother<br>" color LAA<br>" color LAAA<br>" color LAAA<br>" color LAAA<br>" color LAAAA<br>" color LAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA                                     | " Birthplace-City_ Sendmont State Alsburn 4                   |
| Widewar<br>Diverced   Ist, 2nd or 3rd<br>marriage<br>Maiden name of Mother. July AM With<br>Bride's name<br>Automatic and Am With<br>Bride's name<br>Automatic and Am With<br>Bride's name<br>Automatic and Automatic<br>a color LA<br>a | " Residence-Street No. 7.2.3 12 Wlaforma City Sudwarteda Ling |
| Maiden name of Mother Sama An Automatic<br>Bride's name<br>Are age. 23<br>" color LAA<br>" cocupation Jonutate<br>" Birthplace-City Munuffer<br>" Birthplace-City Munuffer<br>" Residence-Street No. 27 Jon Manuary City June<br>Single<br>Writow<br>Divoged Jack Sama<br>Maiden name of Mother Data<br>Maiden name of Mother Data<br>Place of this marriage Auto A H31<br>Place of this marriage Auto A H31<br>Place of this marriage Automatic A H31<br>Witness Name   | Single       Widower       Divorced         Ist, 2nd or 3rd   |
| Bride's name Article and<br>Her age 23<br>" color DAA<br>" occupation annuality<br>" Birthplace-City Munuel State Surd<br>" Residence-Street No. 27 Sulfammer City State Surd<br>Witness Surder City Munuel State Surd<br>" Residence-Street No. 27 Sulfammer City State Sulfammer City State Surd<br>" Residence-Street No. 27 Sulfammer City State Sulfamm   |   |
| Her age 23<br>" color LAA<br>" occupation Jonutate<br>" Birthplace-City Muturel State July<br>" Residence-Street No. ? Particular City July and North<br>Single<br>Wirdows<br>Date of Father.<br>Place of this marriage<br>Place of this marriage<br>Place of this marriage<br>Place of this marriage<br>His address.<br>Name.<br>Witness  | Maiden name of Mother. J. www. Ann ywally                     |
| " color LAA " occupation Junuities " Birthplace-City Muture State June State State June State June State June State State June State State June State State June State Sta  |   |
| * occupation with the state occupation with the state of this marriage   | Her age 23  |
| Birthplace-City_MunulState_Support     Residence-Street No. 2.1Null_interview City_State_Street No. 2.1Null_interview City_State   | " color_la.d  |
| " Residence-Street No. ?? Subject to Site Subject of Single<br>Single<br>Withow Ist, 2nd or 2nd<br>marriage<br>Name of Father.<br>Maiden name of Mother Banthas Mallay<br>Date of this marriage<br>Name and title of person<br>Performing this marriage<br>His address Subject of Manual Single<br>Witness   | " occupation Downthe  |
| Single<br>Withows<br>Divorced<br>Name of Father.<br>Maiden name of Mother<br>Date of this marriage<br>Name and title of person<br>Performing this marriage<br>His address<br>Name.<br>Witness  | " Birthplace-City_ManuelState_July                            |
| Witness  | " Residence-Street No. 12 7 Juli form a City Sudum af Why Ind |
| Maiden name of Mother Barthan Mallay<br>Date of this marriage Suburnapula Such<br>Name and title of person<br>Performing this marriage Suburnapula Such<br>His address Such and Manual Such<br>Witness Name  | Widows }  |
| Date of this marriage.<br>Place of this marriage.<br>Name and title of person<br>Performing this marriage.<br>His address.<br>Name.<br>Witness   | Name of Father Malla Smyth                                    |
| Place of this marriage<br>Place of this marriage<br>Name and title of person<br>Performing this marriage<br>His address<br>Witness Name  | Maiden name of Mother Beattuce Manlay                         |
| Name and title of person<br>Performing this marriage Aline & Manuscurry Aline<br>His address Sucher Anie State Aline Sta   | Date of this marriage June 29 1931                            |
| Witness { Name   | Name and title of person                                      |
| Witness {  | His address. Duchrand his Jud J.                              |
| Witness {  | ( Name  |
|  | Witness   |



1634

To Be Returned by Minister or Other Person Performing Ceremony nyN Mand Groom's name. His age ... nou color. occupation des Birthplace-City ... " Residence--Street N City 4 Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Mande Enn ly Willis 40 Her age ... White color.... machenher occupation lbyril Birthplace-City State 4 6 Residence-Street No3019 22 10 и .Citv Single Widow 1st, 2nd or 3rd vor marriage Divorced Name of Father Maiden name of Mother..... len 3 79 12 Date of this marriage 62 Place of this marriage ... Name and title of person Performing this marriage His address. Vame Witness

Marriage Record for Board of Health



1635

| Bieliene M. Greeman and Ruth Storts man<br>Groom's name William M. Greinigen<br>His age 34<br>" color While<br>" occupation Cheupst<br>" Birthplace-City Jerk Atate 9 a.<br>" Residence-Street No. 10.30 W. Mandel City Jork Va.<br>Single<br>Widower Single Ling Lange Lang |
|--|
| Groom's name William M. Meiniger<br>His age 34<br>" color While<br>" occupation Cheryper<br>" Birthplace-City Jerk Atate 9 a.<br>" Residence-Street No. 10.30 W. Montel City Jerk 9 a.<br>Single<br>Wildower Single [1st, 2nd or 3rd] First  |
| " color  |
| " occupation Cherry A<br>" Birthplace-City Jerk Atate Ba;<br>" Residence-Street No. 10.30 W. Montel City Jork Se.<br>Single<br>Widower Single [1st, 2nd or 3rd] First  |
| " Birthplace-City Jerk State 99.<br>"Residence-Street No. 10. 30 W. Montel City Jork. 89.<br>Single<br>Widower Single [1st, 2nd or 3rd] First  |
| " Residence-Street No. 10. 30 W. Mobile City Jork. V. Q.<br>Single<br>Widower Single [1st, 2nd or 3rd] First   |
| Single<br>Widower Single [1st, 2nd or 3rd] First   |
| Widower 1st, 2nd or 3rd  |
|  |
| Name of Father Loge Co VICIMAIL  |
| Maiden name of Mother Cliffing Canward   |
| Bride's name Ruth Startyman  |
| Her age 37   |
| " color While  |
| " occupation Salesled  |
| " Birthplace-City Shippferfeel State This  |
| " Residence-Street No. 32 7/6. Jalloz City Sugar for   |
| Single<br>Widow<br>Divorced Ariele [1st, 2nd or 3rd<br>Divorced Ariele [1st, 2nd or 3rd]   |
| Name of Father W W. Slar Small   |
| Maiden name of Mother Achler for the meander for   |
| Date of this marriage  |
| Place of this marriage The lique light for his   |
| Name and title of person Rev. Clarence & Lardens   |
| His address 327 6. Lall CV. Pruy   |
| A A A  |
| Name Clarcule Lazeler  |
| Witness Address 327 6. Lall Gr. Juliy  |

FILED JUL 11930 General B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony avis ona and Groom's name His age. " color L Lua occupation Birthplace State " -Citv Residence " Street No Single nd 1st, 2nd or 3rd Widowei Divorced marriage Name of Father Maiden name of Mother. 019 Bride's name Her age color. 0 . occupation State Birthplace " City ч Residence Street No. a 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 83 Addre

FILED JUN 30 1930 Glenn B Retston

.

1637

| Marriage Record for Board of Health<br>To Be Returned by Minister or Other Person Performing Ceremony |
|---|
| Sand Suffer and since the one office water  |
| Groom's name of an Cuke   |
| His age 25  |
| " color_evhite p  |
| " occupation Adlesman   |
| " Birthplace-CityMenophisState  |
| " Residence-Street No. Circumente City Ohis   |
| Single<br>Widower<br>Divorced   |
| Name of Father. Jones Sproud & ule  |
| Maiden name of Mother anna grannon  |
| Bride's name Mull Low M- Intyre   |
| Her age 18  |
| " coloreshite   |
| " occupation  |
| " Birthplace-City Vill Tap State My   |
| " Residence-Street No. Jo laypaal City Anaple   |
| Single<br>Widow<br>Divorced   |
| Name of Father Sed M- Intyre  |
| Maiden name of Mother Iva Malland   |
| Date of this marriage   |
| Place of this marriage  |
| His address Dudwandfuli Juch Q J  |
| { Name  |
| Witness Address   |
|   |



1638 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony 0. and. Groom's name... His age 2 " color. 0 occupation ... Birthplace-City State Residence--Street No City 4 Single Widower Q 1st, 2nd or 3rd Divorced marriage Name of Father. Maiden name of Mother 00 Bride's name 2 Her age. color. 4 Birthplace-City " State N " Residence-Street No .City Place) Wordruff Л 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 His address Name Witness Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and a Groom's name His age. 0 color let " amer occupation " denty State Birthplace-City 4 Residence-Street No " City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ..... color white occupation State Birthplace-City 77 w. Residence-Street No .Citv Single 1st 2nd or 3rd Widow marriage Divorced 6 rue 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

FILED Senn B Palston

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony P. P. ands ances Groom's name His age -m u color. occupation ч Birthplace--Citv " State Residence-Street No. к City Single Widower 1st. 2nd or 3rd in Divorced marriage Name of Father Maiden name of Mother usan Bride's name Inn Her age 1-altin u color 10 occupation ..... R. Birthplace-City State 4 Residence-Street No. Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother. aves Date of this marriage. me Place of this marriage. Name and title of person Performing this marriage His address Name Witness Address

FILED JUN 80 1930 Stenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony (app) INA and Groom's name. ADUM His age .... " color. mile occupation 4 Birthplace-City. 74/1 " State mmg Residence-Street No. 223 44 City . Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father 3 leas. NON Maiden name of Mother. ainse Bride's name Her age ... 4 color\_\A occupation ... Donscher Birthplace-City a State. " Residence-Street No. 3 0 City Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father. Maiden name of Mother manin NUM Date of this marriage Place of this marriage. Name and title of person Performing this marriage. His address. Name. Witness Address

FILED JUL 9 1930 Genn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony : Lei 100 oche uland Groom's name ua. in the ~ 1 ~ . 15 His age ... " color. " occupation Birthplace-City. State ч ua Residence-Street No. " City 211.6 Single Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name Her age ... 11/1 color..... 4 occupation Birthplace-City State " anat " Residence-Street No Single 1st, 2nd or 3rd Widow marriage Divorced ALA 21 Name of Father Maiden name of Mother. ino Date of this marriage Place of this marriage .... Name and title of person Performing this marriage His address llo Name Witness Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name His age 31 color white u occupation Birthplace-City. ele State " Residence-Street No. City Single Widower Ist, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Lel Bride's name Her age color while 6 occupation Birthplace-City State " " Residence-Street No. 4 City a Single 1st, 2nd or 3rd Widowmarriage 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

FILED IUL 2 1930 Serme B Rector

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

and Franklin Carbin Groom's name. His age 2.0 " color occupation han onling Birthplace State 4 4 Residence -Street No. nahr Single Widower 2 1st, 2nd or 3rd Divorced marriage Name of Father horas Maiden name of Mother. Bride's name Her age ... 4 color ographer occupation smill Birthplace-City State " 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 S



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony lose mmistered I a Groom's nam 2 e His age. Tes " color. и occupation State " Birthplace 1112. 10 4 avedto Residence--Street No. 4 Single Widower 1st, 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother dell Bride's name Her age " color " occupation 00 Birthplace-111 4 City State " Residence-Street No. City 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 Addres

FILED JUL 1930 Glenn B Relation

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony and Groom's name. His age. color. 4 decht occupation Birthplace State. 4 44 Residence Street No. Single 1st, 2nd or 3rd D marriage 312 Name of Father Maiden name of Mother 40 Bride's name Her age. 4 color. 8.8. 2 occupation Birthplace State " " Residence -Street Single 1st, and 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. 3 His address apole Parce Name. Witness Address



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony mulo Willow Delles 4 and rence as 4na Dill Groom's name His age 28 Ahite color uspokes It. Rhoy, occupation Gerun orta Birthplace -City. State Residence-Street No. 60 han It 9 ma u City Single Widower 1st, 2nd or 3rd Divorced marriage AL Name of Father melle Maiden name of Mother Baw lorence Bride's name 22 Her age Wh. Le color occupation Birthplace 4 State 4 Residence-Street No. .Citv Single 1st, 2nd or 3rd Widow marriage Divorced Bn Name of Father Maiden name of Mother. 30 1931 Date of this marriage hunder \$217 barlial Place of this marriage. Name and title of person Para P Performing this marriage 421 Leu n His address Name. Witness Addres

FILED

JUL 2 7 1931

Genn B Retaton.

1648

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

and Groom's name His age. 44 color. occupation State 44 Birthplace Residence-Street No 22 Single Widower<sup>L</sup> 1st. 2nd or 3rd Divorced marriage Name of Fathe Maiden name of Mother Bride's name Her age. " color. 4 occupation 4 Birthplace-State -City " Residence-Street No City Single Widow L 1st, 2nd or 3rd marriage Divorced Name of Fathe 22 -0 ul 20 ul 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



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Julson & and Groom's name. His age ... 4 color. occupation " 1 bus oState. " Birthplace--Citv " Residence-Street No. 1 City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother. Bride's name Her age. 4 color 4 occupation " Birthplace-State -City " Residence-Street No 10 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. 1. com le ! Name Witness 0 Address



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

| and   |
|---|
| Groom's name Jewall Paul Vernon   |
| His age. (Aug. 4'03 -) 27 yrst  |
| " color   |
| " occupation  |
| " Birthplace-City. Camber dage State Mass.  |
| " Residence-Street No. 450 Schota Aver City   |
| Single     Single       Widower     Single       Divorced     Ist, 2nd-or-3rd   |
| Name of Father Arthur Jawall  |
| Maiden name of Mother Dales, Harriett M.  |
| Bride's name Allison, Ruth Lyoila   |
| Her age (Sapt 15 th'05-) 25+  |
| " color Neg.t. a  |
| " occupation Teachar  |
| " Birthplace-City_ Indianapalis_State_ Indiana  |
| " Residence-Street No. 2168 M. Capital Asa City.  |
| Single     Jetz g /c     [1st, 2nd or 3rd]     154       Widow     marriage     154   |
| Name of Father  |
| Maiden name of Mother   |
| Date of this marriage $\int d\mu = 30^{-6h} / 1931$   |
| Place of this marriage <u>2165</u> <u>N. Capital Asc.</u> <u>City</u><br>Name and title of person<br>Performing this marriage |
| His address   |
|   |
| Witness Name  |
| Witness { Address   |

FILED JUL 21930 Gener B Reletan

1651 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony an Anson un and in Groom's name His age .... En color. " occupation Birthplace\_City.... " State " Residence-Street No City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father n Maiden name of Møther Bride's name. Her age. 4 color. occupation Birthplace-State 4 " Residence-City -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 C His address. 7 Name Witness 2 Address



1652 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony birthay? and. Groom's name. His age 20 occupation ands State Birthplace и Residence-Street Single Widower 1st, 2nd or 3rd Divorced mar Name of Father Maiden name of Mother Bride's name Her age color occupation Birthplace-Cit u Stat Residence-Street No. 4 Single 1st, 2nd or 3rd Widow mar Divorced Name of Father Maiden name o Mother. Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address Witness Address



1653 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony e and U Groom's name. His age ... 0 " color. occupation " Birthplace-City State " Residence-Street No Single 1st, 2nd or 3rd Widower Divorced marriage Name of Father Maiden name of Mother in Bride's name いニ Her age ... White 4 color. as a la 4 occupation Birthplace-City. " State " Residence-Street No City Single 1st, 2nd or 3rd Widow marriage Divorced Name of Father Maiden name of Mother.\_\_ 31 Date of this marriage Place of this marriage. Name and title of person Performing this marriage His address. Name Witness Address

FILED JUL 2 1930 Slenn B Relation CENERX

1654 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony m.11. 17 and roll Groom's name His age ... color. occupation Birthplace-City State Residence-Street No. 44 City Single s Widower 1st. 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother Bride's name 0 Her age. color occupation Birthplace-4 -City State Residence-Street No. 4 Single Widow 1st, 2nd or 3rd marriage Divorced Name of Father Maiden name of Mother 30 3 Date of this marriage Place of this marriage Name and title of person Performing this marriage His address Name... JALLAN Hawles Witness Address 410 Sa Sin tu .te

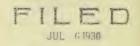
therman B Reinte ; - · ·

1655 Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony eden A MED Groom's name. His age 4 color... occupation Birthplace " State Residence-Street No 4 City Widower 1st, 2nd or 3r Divorged mar Name of Father Maiden name of Mother Bride's name Her age " color. occupation Birthplace u State " Residence-Street No City Single 1st, 2nd or ard 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

FILED JUL 21930 Stenne B Rete

Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Maser 1 Pauras and Groom's name. al His age color 44 cer occupation hear Birthplace-City State " 44 Residence -Street No. - City Single Widower 1st, 2nd or 3rd Divorced marriage Name of Father Maiden name of Mother luce no Bride's name Her age. color. " occupation uspol State и Birthplace и Residence id 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

1656



Germ B Russten

1657

|    |    | Marria   | age | e Record   | f   | or E | Board  | of  | Health  | 1        |
|----|----|----------|-----|------------|-----|------|--------|-----|---------|----------|
| To | Be | Returned | by  | Minister o | r C | ther | Person | Per | forming | Ceremony |

| Ewing poorp a                 | nd                              |  |  |  |  |  |  |
|-------------------------------|---------------------------------|--|--|--|--|--|--|
| Groom's name                  |                                 |  |  |  |  |  |  |
| His age 24                    |                                 |  |  |  |  |  |  |
| " color                       |                                 |  |  |  |  |  |  |
| " occupation Un File          | pling                           |  |  |  |  |  |  |
| " Birthplace-City             | State                           |  |  |  |  |  |  |
| " Residence-Street No.        | City                            |  |  |  |  |  |  |
| Single<br>Widower<br>Divorced | 1st, 2nd or 3rd        marriage |  |  |  |  |  |  |
| Name of Father. 244270 have   |                                 |  |  |  |  |  |  |
| Maiden name of Mother         | 54                              |  |  |  |  |  |  |
| Bride's name Ether the        | la                              |  |  |  |  |  |  |
| 21                            |                                 |  |  |  |  |  |  |
| " color Marto                 |                                 |  |  |  |  |  |  |
| " color                       |                                 |  |  |  |  |  |  |
| " Birthplace-City             | State                           |  |  |  |  |  |  |
| " Residence—Street No.        | City                            |  |  |  |  |  |  |
| Single<br>Widow<br>Divorced   | { 1st, 2nd or 3rd marriage }    |  |  |  |  |  |  |
| Name of Father                |                                 |  |  |  |  |  |  |
| Maiden name of Mother         |                                 |  |  |  |  |  |  |
| Date of this marriage         |                                 |  |  |  |  |  |  |
| Place of this marriage        |                                 |  |  |  |  |  |  |
| His address                   |                                 |  |  |  |  |  |  |
|                               | 1                               |  |  |  |  |  |  |
| Witness { Name                | et Korenna                      |  |  |  |  |  |  |
| ( Aduress                     |                                 |  |  |  |  |  |  |

FILED JUL 11930 Blens B Reetin

| To Be Returned by Minister or Other Person Performing Ceremony  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| Byrrow K. Kust and angelyn & Commy ton  |  |  |  |  |  |  |
| Groom's name Byron K. Kust  |  |  |  |  |  |  |
| His age 2-7   |  |  |  |  |  |  |
| " color   |  |  |  |  |  |  |
| " Birthplace City John Jos State Dl   |  |  |  |  |  |  |
| " Residence-Street No. 3155 Collyc An City John Angel 2   |  |  |  |  |  |  |
| Single<br>Widower<br>Divorced List, 2nd or 3rd<br>marriage  |  |  |  |  |  |  |
| Name of Father Junior Myto  |  |  |  |  |  |  |
| Maiden name of Mother Della Dameelo   |  |  |  |  |  |  |
| Bride's name Anglyn B. Cronz form   |  |  |  |  |  |  |
| Her age 24  |  |  |  |  |  |  |
| " color bott  |  |  |  |  |  |  |
| " occupation  |  |  |  |  |  |  |
| " Birthplace-City   |  |  |  |  |  |  |
| " Residence-Street No. 42.90 h munde-City Judrach   |  |  |  |  |  |  |
| Single<br>Widow<br>Divorced   |  |  |  |  |  |  |
| Name of Father hand hand hand hand hand   |  |  |  |  |  |  |
| Maiden name of Mother. And Market Market  |  |  |  |  |  |  |
| Date of this marriage 30 - 1931   |  |  |  |  |  |  |
| Place of this marriage Androphys<br>Name and title of person<br>Performing this marriage Rundhe lunin May |  |  |  |  |  |  |
| His address 1935 n. Marchine  |  |  |  |  |  |  |
| Witness Name abland Q, Aust<br>Address Dichmond, Indiana  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |

1 0

D

1558

C TT 1.1

Return this Report to County Clerk with License and Certificate

....



Marriage Record for Board of Health To Be Returned by Minister or Other Person Performing Ceremony Me Dem and Groom's name en 40 His age ... " color..... mil occupation. 711 Birthplace-City 4 State 4 ٤ ц Residence-Street No City Single Widower 2 1st. 2nd or 3rd Divorced marriage 1 Name of Father Marar orl Maiden name of Mother P 10 en Bride's name. 3 Her age " color ichar 4 occupation. Birthplace-City. а no di State - 5 Residence-Street No. ч Single 1st, 2nd or 3rd Wide no Widow marriage Divorced Name of Father Maiden name of Mother. 30 Date of this marriage Place of this marriage, r Ø 6 Name and title of person Performing this marriage. 16 11 His address 1 Name Witness Address

1659

FILED JUL 2 1930 Glenne B Rest 77 02353 51 .





