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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

FLOYD County

No. 78-165

File

2-10-78
Date of Application

MALE
Medical Examination Report Dated 1-22-78
Name of Physician P. Youngs

FEMALE
Medical Examination Report Dated 1-22-78
Name of Physician P. Youngs

ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars ($500.00)".

MALE APPLICANT

Name: First Ralph Middle F. Last Berryman

Date of Birth: Month 8 Day 9 Year 1936

Place of Birth (State or foreign country) New Albany Ind

Residence Address: Street or R. R. RR#1 Box 359 City Pekin County Washington State Ind.

Previous Marital Status: Never Married ☐ OR 2

Last Marriage Ended By: Death ☐ Divorce ☒ Annulment ☐

Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree

☒ Other (Specify) Drivers license

1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐
   If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease? No ☐ Yes ☐
3. Are you related to the female applicant closer than second cousin? No ☐ Yes ☐
4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
5. Are you now under the influence of a narcotic drug? No ☐ Yes ☒
6. List the full names of any dependent children.
   Karen
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☒
   If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Frank Berryman
   Residence of father (if deceased so state) deceased
   Birthplace of father (State or foreign country) Manchester Ky.
9. Full maiden name of mother Bertha M. Hall
   Residence of mother (if deceased so state) deceased
   Birthplace of mother (State or foreign country) Irving, Ky.

State of Indiana, County of Floyd } ss: I depose and state the information given in this application is true and correct.

Signed Ralph F. Berryman

New Address

Subscribed and sworn to before me this 10th day of February, 19 78

Glenn L. Hatfield Clerk FLOYD Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

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

State of Indiana, County of } ss:

Signed ..... Father

Signed ..... Mother

Subscribed and sworn to before me this ..... day of ....., 19.....

..... Clerk

FEMALE APPLICANT

Name: First Elizabeth Middle E. Last Kelly

Date of Birth: Month Sept Day 14 Year 1940

Place of Birth (State or foreign country) Charlestown Ind

Residence Address: Street or R. R. 1 to 81 Harrison Ln City New Albany County Floyd State Ind.

Previous Marital Status: Never Married ☐ OR 2

Last Marriage Ended By: Death ☐ Divorce ☒ Annulment ☐

Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree

☒ Other (Specify) Drivers license

1. Are you now or have you ever been adjudged to be of unsound mind? No ☐ Yes ☐
   If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease? No ☐ Yes ☐
3. Are you related to the male applicant closer than second cousin? No ☐ Yes ☐
4. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
5. Are you now under the influence of a narcotic drug? No ☐ Yes ☐
6. List the full names of any dependent children.
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
   If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Earl Lynch
   Residence of father (if deceased so state) New Albany Ind
   Birthplace of father (State or foreign country) Leavenworth Ind
9. Full maiden name of mother Elizabeth Payne
   Residence of mother (if deceased so state) New Albany Ind
   Birthplace of mother (State or foreign country) Hardinsburg Ky

State of Indiana, County of Floyd } ss: I depose and state the information given in this application is true and correct.

Signed Elizabeth E. Kelly

New Address

Subscribed and sworn to before me this 10th day of February, 19 78

Glenn L. Hatfield Clerk FLOYD Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

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

State of Indiana, County of } ss:

Signed ..... Father

Signed ..... Mother

Subscribed and sworn to before me this ..... day of ....., 19.....

..... Clerk

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

RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE

Be It Remembered, *there was filed in my office a marriage license issued by the clerk of the ..... Circuit Court of Indiana dated the ..... day of ....., 19....., authorizing the joining together as husband and wife ..... and .....*

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

I, ... hereby certify that on the ..... day of ....., one thousand nine hundred and ..... at ....., County of ....., State of Indiana, Groom ..... of ..... County, State of ..... and, Bride ..... of ..... County, State of ....., were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of ..... County.

Dated this ..... day of ....., 19.....

Signed .....

Official Designation .....

Filed and recorded in accordance with the laws of the State of Indiana this ..... day of ....., 19.....

Signed ..... Clerk

FLOYD *Circuit Court*

No. 291

71-92
830

RALPH F. BERRYMAN MAJOR (USAF)
6214 HWY. 60
SELLERSBURG IND. 47172 PH. 282-7809

Oct 3 19 77

PAID
Mutual Trust & Deposit Company
OCT 13 1977

PAY TO THE ORDER OF Iris R. Berryman $ 225.00

Two Hundred & Twenty-Five & NO/100 DOLLARS

MUTUAL TRUST BANK
MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

No. 278

71-92
830

RALPH F. BERRYMAN MAJOR (USAF)
6214 HWY. 60
SELLERSBURG IND. 47172 PH. 282-7809

Sept 3 19 77

PAY TO THE ORDER OF Iris Berryman $ 225.00

Two Hundred & Twenty-Five & NO/100 DOLLARS

MUTUAL TRUST BANK
MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

No. 261

71-92
830

RALPH F. BERRYMAN MAJOR (USAF)
6214 HWY. 60
SELLERSBURG IND. 47172 PH. 282-7809

Aug 4 19 77

PAY TO THE ORDER OF Iris R. Berryman $ 225.00

Two Hundred & Twenty-Five & NO/100 DOLLARS

MUTUAL TRUST BANK
MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

No. 331

71-92
830

RALPH F. BERRYMAN MAJOR, USAF
RT. 1 BOX 359 -RET 317-34-8478
PERKIN IN 47165

Dec 30 19 77

PAID
Mutual Trust & Deposit Company
JAN 5 1978

PAY TO THE ORDER OF Iris R. Berryman $ 215.00

Two Hundred & Fifteen & NO/100 DOLLARS

MUTUAL TRUST BANK
MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000021500⑈

No. 319

71-92
830

RALPH F. BERRYMAN MAJOR, USAF
RT. 1 BOX 359 -RET 317-34-8478
PERKIN IN 47165

Dec 4 19 77

PAID
Mutual Trust & Deposit Company
DEC 13 1977

PAY TO THE ORDER OF Iris R. Berryman $ 215.00

Two Hundred & Fifteen & NO/100 DOLLARS

MUTUAL TRUST BANK
MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000021500⑈

No. 306

71-92
830

RALPH F. BERRYMAN MAJOR, USAF
RT. 1 BOX 359 -RET 317-34-8478
PERKIN IN 47165

Oct 31 19 77

PAID
Mutual Trust & Deposit Company
NOV 1 1977

PAY TO THE ORDER OF Iris R. Berryman $ 225.00

Two Hundred & Twenty-Five & NO/100 DOLLARS

MUTUAL TRUST BANK
MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

No. 180

RALPH F. BERRYMAN MAJOR (USAF)
116 MORGAN AVE. 317-34-8478
NEW ALBANY IND. 47150

71-92
830

Feb 3 19 77

PAY TO THE ORDER OF IRIS R. BERRYMAN $ 230.00

Two Hundred + Thirty & No/100 DOLLARS

MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000023000⑈

No. 217

RALPH F. BERRYMAN MAJOR (USAF)
6214 HWY. 60
SELLERSBURG IND. 47172 PH. 282-7809

71-92
830

May 2 19 77

PAY TO THE ORDER OF IRIS R. BERRYMAN $ 225.00

Two Hundred & Twenty Five DOLLARS

MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

No. 196

RALPH F. BERRYMAN MAJOR (USAF)
116 MORGAN AVE. 317-34-8478
NEW ALBANY IND. 47150

71-92
830

MAR 1 19 77

PAID
Mutual Trust & Deposit Company
NEW ALBANY, INDIANA

PAY TO THE ORDER OF IRIS R. BERRYMAN $ 225.00

Two Hundred & Twenty-Five & No/100 DOLLARS

MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

No. 233

RALPH F. BERRYMAN MAJOR (USAF)
6214 HWY. 60
SELLERSBURG IND. 47172 PH. 282-7809

71-92
830

Jun 3 19 77

PAID
Mutual Trust & Deposit Company
NEW ALBANY, INDIANA

PAY TO THE ORDER OF IRIS R. BERRYMAN $ 215.00

Two Hundred & Fifteen & No/100 DOLLARS

MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000021500⑈

No. 209

RALPH F. BERRYMAN MAJOR (USAF)
6214 HWY. 60
SELLERSBURG IND. 47172 PH. 282-7809

71-92
830

April 3 19 77

PAID
Mutual Trust & Deposit Company
NEW ALBANY, INDIANA

PAY TO THE ORDER OF IRIS R. BERRYMAN $ 225.00

Two Hundred Twenty-Five & No/100 DOLLARS

MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

No. 248

RALPH F. BERRYMAN MAJOR (USAF)
6214 HWY. 60
SELLERSBURG IND. 47172 PH. 282-7809

71-92
830

July 3 19 77

PAID
Mutual Trust & Deposit Company
NEW ALBANY, INDIANA

PAY TO THE ORDER OF IRIS R. BERRYMAN $ 225.00

Two Hundred & Twenty-five & No/100 DOLLARS

MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6⑆4⑈9⑈ ⑈0000022500⑈

9 9 9 0 0 0 0 8 0 2 0

No. 171

71-92
830

RALPH F. BERRYMAN MAJOR (USAF)
116 MORGAN AVE. 317-34 8478
NEW ALBANY IND. 47150

Dec 31 19 76

PAID

PAY TO THE ORDER OF IRIS R. BERRYMAN $ 224.00

TWO HUNDRED & Twenty-Four & NO/100 DOLLARS

MUTUAL TRUST BANK
MUTUAL TRUST BANK NEW ALBANY, INDIANA 47150

Ralph F. Berryman

⑆0830⑈0092⑆ 06⑈20⑈6149⑈ ⑈0000022400⑈