

Church/Organization: Perinton Town Clerk
1350 Turk Hill Rd.
Fairport, NY 14450

Volume Title: Perinton Town Marriages 1952-1958

VOLUME CONTENT

Perinton Town marriage records dated 5 Jan 1952 – 20 Sept 1958 with index

Film/Scan Location: Perinton Town Hall
1350 Turk Hill Rd.
Fairport, NY 14450

Dates Imaged: June 2014

Number of pages: 179

Notes: The pages are numbered 1 thru 152. There are three records per page. The index is at the beginning of the book.

Birthdates later than 1 Jan 1940 have been removed and replaced by this symbol . This has been done to comply with the New York State Vital records privacy guidelines.

The on line version of this book has been split into two volumes to improve access time.

**Digitally photographed or scanned from original documents by:
The Rochester Genealogical Society, Inc.
Church Records Preservation Committee**

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Kathryn Heintz
Linda Koehler

Larry Lavery
Larry Naukam
Jim Paprocki

RECORD OF MARRIAGES

mailed to state dept + reported to pd to state health 8/15/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 35
 Town Perinton Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Kenneth Bruce Ingianni</u>	Color <u>white</u>	Name <u>Betty Lou Hampton</u>	Color <u>white</u>
Residence <u>875 W. Winthrop Rd Fairport NY</u>	Age <u>27</u> 11/9/26	Residence <u>204 W. Chestnut St. E. Rochester NY</u>	Age <u>18</u> 1/3/36
Occupation <u>Truck driver Greenhouse</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport NY</u>	Former wife or wives living or dead	Birthplace <u>Prestonsburg Ky</u>	Former husband or husbands living or dead
Father <u>Rocco Ingianni</u>	Divorced	Father <u>Wesley Hampton</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Ruth Rhinewald</u>	" where	Mother <u>Bessie Patricia</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/22/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/22/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraus Fairport NY</u> Date <u>6/19/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>John Kraus Fairport NY</u> Date <u>6/19/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 26 1954</u> License <u>June 26 1954</u> a. v. Marriage <u>July 3 1954 10 A.</u> Place of Marriage <u>East Rochester NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>June 26 1954</u> License <u>June 26 1954</u> a. v. Marriage <u>July 3 1954 10 A.</u> Place of Marriage <u>East Rochester NY</u>	(Month) (Day) (Year) (Hour)
Official <u>Anthony F. Calomeni</u> Profession <u>Catholic Priest</u>	(Signature) (Profession)	Official <u>Anthony F. Calomeni</u> Profession <u>Catholic Priest</u>	(Signature) (Profession)
Period for solemnization of marriage begins at <u>11:20 A.M.</u> on the <u>27</u> day of <u>June</u> 19 <u>54</u> and ends the <u>25</u> day of <u>August</u> 19 <u>54</u>		Period for solemnization of marriage begins at <u>11:20 A.M.</u> on the <u>27</u> day of <u>June</u> 19 <u>54</u> and ends the <u>25</u> day of <u>August</u> 19 <u>54</u>	

Certification of Birth (Judge, Children's Court)

City Town of Perinton County Monroe STATE OF NEW YORK No. 36
 Town Perinton Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>John Charles Carini</u>	Color <u>white</u>	Name <u>Marie Teresa Chinelli</u>	Color <u>white</u>
Residence <u>63 High St. Fairport NY</u>	Age <u>21</u> 1/29/33	Residence <u>25 Forest St Pittsford NY</u>	Age <u>17</u> 11/18/36
Occupation <u>S. N. W. S. Coast Guard</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport NY</u>	Former wife or wives living or dead	Birthplace <u>Fairport NY</u>	Former husband or husbands living or dead
Father <u>John Carini</u>	Divorced	Father <u>Louis Chinelli</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Concella Benfante</u>	" where	Mother <u>Anna Buccemi</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>U.S.C.G. Station Hospital Graton Conn</u> Date <u>6/18/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/25/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Jules Birch M.D. Graton Conn</u> Date <u>6/17/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Ernie J. Hamilton 30 Hand Place Pittsford NY</u> Date <u>6/21/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation <u>Mother</u> Date <u>6/26/54</u>	
Consent by _____ Relation _____ Date _____		Consent by <u>(Deceased + has Custody)</u> Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 26 1954</u> License <u>6/26/54 12:00 P.</u> Marriage <u>7/10/54 - 11:00 A.</u> Place of Marriage <u>Rochester, NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>June 26 1954</u> License <u>6/26/54 12:00 P.</u> Marriage <u>7/10/54 - 11:00 A.</u> Place of Marriage <u>Rochester, NY</u>	(Month) (Day) (Year) (Hour)
Official <u>Warren B. Shelton</u> Profession <u>Clergyman</u>	(Signature) (Profession)	Official <u>Warren B. Shelton</u> Profession <u>Clergyman</u>	(Signature) (Profession)
Period for solemnization of marriage begins at <u>12:00 P.</u> on the <u>27</u> day of <u>June</u> 19 <u>54</u> and ends the <u>25</u> day of <u>August</u> 19 <u>54</u>		Period for solemnization of marriage begins at <u>12:00 P.</u> on the <u>27</u> day of <u>June</u> 19 <u>54</u> and ends the <u>25</u> day of <u>August</u> 19 <u>54</u>	

Certification of Birth (Judge, Children's Court)

City Town of Perinton County Monroe STATE OF NEW YORK No. 37
 Town Perinton Clerk Charlatti Claff

GROOM		BRIDE	
Name <u>Richard Russell Brewerton</u>	Color <u>white</u>	Name <u>Delores Jeanette Delhoff</u>	Color <u>white</u>
Residence <u>7 W. Church St Fairport NY</u>	Age <u>21</u> 12/9/32	Residence <u>24 Miles Ave Fairport NY</u>	Age <u>22</u> 8/11/31
Occupation <u>Technician Radio & Television</u>	No. of marriage <u>1st</u>	Occupation <u>Payroll clerk - Business machines</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester NY</u>	Former husband or husbands living or dead
Father <u>William Edmund Richard Brewerton</u>	Divorced	Father <u>Edward Eugene Delhoff</u>	Divorced
Birthplace <u>India</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Rose Violet Russell</u>	" where	Mother <u>Lillian Fanny Dwyer</u>	" where
Birthplace <u>England</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/25/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/25/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Erich Jacobson Fairport NY</u> Date <u>6/22/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Erich Jacobson Fairport NY</u> Date <u>6/22/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 28 1954</u> License <u>June 28 1954</u> a. v. Marriage <u>7/3/54 - 9: A</u> Place of Marriage <u>Pittsford NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>June 28 1954</u> License <u>June 28 1954</u> a. v. Marriage <u>7/3/54 - 9: A</u> Place of Marriage <u>Pittsford NY</u>	(Month) (Day) (Year) (Hour)
Official <u>James Callan</u> Profession <u>Catholic Priest</u>	(Signature) (Profession)	Official <u>James Callan</u> Profession <u>Catholic Priest</u>	(Signature) (Profession)
Period for solemnization of marriage begins at <u>8:22 A.M.</u> on the <u>29</u> day of <u>June</u> 19 <u>54</u> and ends the <u>27</u> day of <u>August</u> 19 <u>54</u>		Period for solemnization of marriage begins at <u>8:22 A.M.</u> on the <u>29</u> day of <u>June</u> 19 <u>54</u> and ends the <u>27</u> day of <u>August</u> 19 <u>54</u>	

Certification of Birth (Judge, Children's Court)

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 38
Town Perinton Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>David Paul Cherry</u>	Color <u>white</u>	Name <u>Kathryn Anne Lobdell</u>	Color <u>white</u>
Residence <u>210 Portland Ave. Rochester, N.Y.</u>	Age <u>21-9/24/32</u>	Residence <u>2023 Manitou Rd. Rochester, N.Y.</u>	Age <u>18-12/11/35</u>
Occupation <u>Sailor - U.S. Navy</u>	No. of marriage <u>1st</u>	Occupation <u>Stenographer - Home Bldg. Supplies</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wifes living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Clarence Cherry</u>	Divorced	Father <u>Daniel Schuyler Lobdell</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Waisy Goodness</u>	" where	Mother <u>Rhea Bowen Hawes</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab. - Roch, N.Y.</u> Date <u>6/29/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Rochester Health Bureau - Rochester, N.Y.</u> Date <u>6/25/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John P. Pomeroy - 902 Albany Ave. Rochester, N.Y.</u> Date <u>6/28/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Harold Tracht - 27 N. Goodman St., Roch, N.Y.</u> Date <u>6/23/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u>	(Form)	Proof of age <u>Certification of Birth</u>	(Form)
Date: Affidavit <u>7/1/54</u> License <u>7/1/54-2:59P.M.</u> Marriage <u>7/1/54-4:30P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Lee Clendenning</u> Profession <u>Minister</u>	(Name and address of official)	Official <u>Paul F. Cahill</u> Profession <u>Justice</u>	(Name and address of official)
Period for solemnization of marriage begins at <u>2:59 P.M.</u> on the <u>1st</u> day of <u>July</u> 19 <u>54</u> and ends the <u>29</u> day of <u>August</u> 19 <u>54</u> .		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u> .	

Reported & Rd to State Dept of Health 8/1/54
Mailed to State Dept of Health 8/5/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 39
Town Perinton Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Alan Morgan Young</u>	Color <u>white</u>	Name <u>Gertrude Helen Cook</u>	Color <u>white</u>
Residence <u>29 Summit St., Fairport, N.Y.</u>	Age <u>47-5/8/07</u>	Residence <u>175 W. Church St. - Fairport, N.Y.</u>	Age <u>41-4/9/13</u>
Occupation <u>Supervisor - Car Shops</u>	No. of marriage <u>2nd</u>	Occupation <u>Assembler - Osmer Works</u>	No. of marriage <u>2nd</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wifes living or dead <u>dead</u>	Birthplace <u>Portland, N.Y.</u>	Former husband or husbands living or dead <u>living</u>
Father <u>Frank Kelly Young</u>	Divorced	Father <u>Leon Elbert Halcomb</u>	Divorced <u>yes</u>
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when <u>Oct. 13, 1953</u>
Mother <u>Edna Adele Morgan</u>	" where	Mother <u>Iva Mae Halblander</u>	" where <u>Monaca, N.Y.</u>
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom <u>Richard E. Cook</u>
Laboratory Statement <u>Monroe Co. Labs. - Roch, N.Y.</u> Date <u>6/29/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Labs. - Roch, N.Y.</u> Date <u>6/29/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai - Fairport, N.Y.</u> Date <u>6/25/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>John Kraai - Fairport, N.Y.</u> Date <u>6/25/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>7/3/54</u> License <u>7/8/54-4:20P.M.</u> Marriage <u>7/10/54-5:00P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Lee Clendenning</u> Profession <u>Minister</u>	(Name and address of official)	Official <u>Donald W. Halcomb - Victor, N.Y.</u> Profession <u>Justice</u>	(Name and address of official)
Period for solemnization of marriage begins at <u>4:20 P.M.</u> on the <u>9th</u> day of <u>July</u> 19 <u>54</u> and ends the <u>7th</u> day of <u>September</u> 19 <u>54</u> .		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u> .	

Reported & Rd to State Dept of Health 8/1/54
Mailed to State Dept of Health 8/5/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 40
Town Perinton Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Joseph A. Fargare</u>	Color <u>white</u>	Name <u>Jeanne Fadden Coffey</u>	Color <u>white</u>
Residence <u>83 Bond St. Rochester, N.Y.</u>	Age <u>44-2/6/10</u>	Residence <u>651 W. Whitney Road, Fairport, N.Y.</u>	Age <u>33-8/3/20</u>
Occupation <u>Machinist - Factory</u>	No. of marriage <u>2nd</u>	Occupation <u>at home</u>	No. of marriage <u>2nd</u>
Birthplace <u>Angola, N.Y.</u>	Former wife or wifes living or dead <u>dead</u>	Birthplace <u>Ridgeway, Penna.</u>	Former husband or husbands living or dead <u>living</u>
Father <u>Anthony Fargare</u>	Divorced	Father <u>Raymond Louis Fadden</u>	Divorced <u>yes</u>
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when <u>Mar. 28, 1946</u>
Mother <u>Margaret Pizzillo</u>	" where	Mother <u>Doree Lois Lovell Fargare</u>	" where <u>Ontario Co.</u>
Birthplace <u>Italy</u>	" against whom	Birthplace <u>U.S.</u>	" against whom <u>James E. Coffey</u>
Laboratory Statement <u>Monroe Co. Laboratories - 435 E. Henrietta Road Rochester, N.Y.</u> Date <u>7/7/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories - 435 E. Henrietta Road Rochester, N.Y.</u> Date <u>7/7/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>J.H. McEachern Fairport, N.Y.</u> Date <u>7/2/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>J.H. McEachern Fairport, N.Y.</u> Date <u>7/2/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>July 24 1954</u> License <u>7/24/54-11:00A.M.</u> Marriage <u>8/7/54-10:05A.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Milton H. Elmendorf</u> Profession <u>Justice of Peace</u>	(Name and address of official)	Official <u>John A. Bacon - 66 Madison Ave. - Roch, N.Y.</u> Profession <u>Justice</u>	(Name and address of official)
Period for solemnization of marriage begins at <u>11:19 A.M.</u> on the <u>25</u> day of <u>July</u> 19 <u>54</u> and ends the <u>23</u> day of <u>September</u> 19 <u>54</u> .		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u> .	

Reported & Rd to State Dept of Health 8/1/54
Mailed to State Dept of Health 9/5/54

RECORD OF MARRIAGES

Reported to State Dept of Health 8/1/54

mailed to State Dept of Health 8/15/54

Reported to State Dept of Health 8/1/54

mailed to State Dept of Health 8/15/54

mailed to State Dept of Health 9/15/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 41
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Leslie Irving Kimball</u>	Color <u>White</u>	Name <u>Betty Pilato</u>	Color <u>White</u>
Residence <u>43 N. Washington St. Rochester, N.Y.</u>	Age <u>26</u> <u>7/29/27</u>	Residence <u>26 Clarissa St. Rochester, N.Y.</u>	Age <u>25</u> <u>2/5/29</u>
Occupation <u>Plumbing</u>	No. of marriage <u>1st</u>	Occupation <u>Passer - Laundry</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Francis Robert Kimball</u>	Divorced	Father <u>Sam Pilato</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Anna Irene Woodruff</u>	" where	Mother <u>Calia Marcelletti</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>July 20 1954</u>	Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>July 20 1954</u>
Physician's Statement <u>J. Messenger 205 Cumberland St. Rochester, N.Y.</u>	Date <u>July 17 1954</u>	Physician's Statement <u>J. Messenger 205 Cumberland St. Rochester, N.Y.</u>	Date <u>July 17 1954</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>July 24 1954</u> License <u>7/24/54 12:10 P.</u> Marriage <u>7/31/54 9 A.</u>	Place of Marriage <u>Rochester, N.Y.</u>		
Official <u>Les Charles Moseley</u> Profession <u>Roman Catholic Priest</u>	Witness <u>William Harry Pinebold</u>	Witness <u>Delores R. Tardieu</u>	
Period for solemnization of marriage begins at <u>12:10</u> M. on the <u>25</u> day of <u>July</u> 1954 and ends the <u>23</u> day of <u>Sept.</u> 1954.			

City Town of Perinton County Monroe STATE OF NEW YORK No. 42
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Frederick Charles Lavery</u>	Color <u>White</u>	Name <u>Elva Lena Ulrich</u>	Color <u>White</u>
Residence <u>1158 Fairport Road Fairport, N.Y.</u>	Age <u>77</u> <u>Oct 10 1876</u>	Residence <u>1158 Fairport Road Fairport, N.Y.</u>	Age <u>64</u> <u>Dec 28 1889</u>
Occupation <u>Salesman Button factory</u>	No. of marriage <u>2nd</u>	Occupation <u>At home</u>	No. of marriage <u>3rd</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead <u>Dead</u>	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead <u>Dead</u>
Father <u>George Frederick Lavery</u>	Divorced	Father <u>William Herman Ulrich</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Germany</u>	" when
Mother <u>Eliza M. Miller</u>	" where	Mother <u>Anna Bertha Dill</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>7/23/54</u>	Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>7/23/54</u>
Physician's Statement <u>Wilbur S. Bullock Fairport, N.Y.</u>	Date <u>7/22/54</u>	Physician's Statement <u>Wilbur S. Bullock Fairport, N.Y.</u>	Date <u>7/22/54</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>July 27 1954</u> License <u>July 27 1954 10:05 A.</u> Marriage <u>July 28 1954 12 M.</u>	Place of Marriage <u>1158 Fairport Road Fairport, N.Y.</u>		
Official <u>Rev. Elva Thomas</u> Profession <u>V.P.S.</u>	Witness <u>Rev. Fred S. Clark</u>	Witness <u>Marie B. Sime</u>	
Period for solemnization of marriage begins at <u>10:05</u> A. on the <u>28</u> day of <u>July</u> 1954 and ends the <u>26</u> day of <u>September</u> 1954.			

City Town of Perinton County Monroe STATE OF NEW YORK No. 43
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Peter Bernard Vanderwall</u>	Color <u>White</u>	Name <u>Dianse May Lincoln</u>	Color <u>White</u>
Residence <u>Wazy Road Palmyra, N.Y.</u>	Age <u>20</u> <u>Apr 18 1934</u>	Residence <u>831 Turk Hill Road Fairport, N.Y.</u>	Age <u>15</u> <u>May 25 1939</u>
Occupation <u>Labor Iceing plant</u>	No. of marriage <u>1st</u>	Occupation <u>At home</u>	No. of marriage <u>1st</u>
Birthplace <u>Canandaigua, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Brighton, N.Y.</u>	Former husband or husbands living or dead
Father <u>Albert Francis Vanderwall</u>	Divorced	Father <u>Lloyd Harrison Lincoln</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Eliza May Culp</u>	" where	Mother <u>Florence Marion Thran</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>7/23/54</u>	Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>7/23/54</u>
Physician's Statement <u>Wilbur S. Bullock Fairport, N.Y.</u>	Date <u>7/21/54</u>	Physician's Statement <u>Wilbur S. Bullock Fairport, N.Y.</u>	Date <u>7/21/54</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by <u>Eliza May Vanderwall</u> Relation <u>Mother</u> Date <u>7/31/54</u>		Consent by <u>Florence Marion Lincoln</u> Relation <u>Mother</u> Date <u>7/31/54</u>	
Consent by <u>Albert Francis Vanderwall</u> Relation <u>Father</u> Date <u>7/31/54</u>		Consent by <u>Lloyd Harrison Lincoln</u> Relation <u>Father</u> Date <u>7/31/54</u>	
Proof of age <u>Certification of birth</u> (Form)		Proof of age <u>Certification of birth</u> (Form)	
Date: Affidavit <u>July 31 1954</u> License <u>July 31 1954 1:15 P.</u> Marriage <u>8/14/54 3:05 P.</u>	Place of Marriage <u>East Rochester, N.Y.</u>		
Official <u>Arthur L. Lacey</u> Profession <u>Chaplain</u>	Witness <u>Betty M. ...</u>	Witness <u>William P. Lincoln</u>	
Period for solemnization of marriage begins at <u>1:15 P.</u> on the <u>1st</u> day of <u>August</u> 1954 and ends the <u>29</u> day of <u>September</u> 1954.			

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 44
 Clerk Charlotte Clapp
 GROOM BRIDE

Name Homer A. Prudom Color white
 Residence 47 Park Ave., Fairport, N.Y. Age 24 - 12/15/29
 Occupation Care operator - Car shop No. of marriage 1st
 Birthplace Rochester, N.Y. Former wife or wives living or dead.
 Father Homer George Prudom Divorced
 Birthplace U.S. " when
 Mother Alice E. Allen " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe Co. Lab. - 435 E. Henrietta Rd. - Rochester, N.Y. Date 7/27/54
 Physician's Statement Wilbur S. Bushella - 20 W. Church St. - Fairport, N.Y. Date 7/27/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 8/3/54 License 8/3/54 - 11:00 A.M. Marriage Aug 7 1954 1 P.M. Place of Marriage Fairport N.Y.
 Official Howard V. Morse Profession Chapman Witnesses John Warren Bangee Tallinger Pittsford N.Y.
 Period for solemnization of marriage begins at 11 A.M. on the 7th day of August 1954 and ends the 2 day of October 1954

Name Shirley Myrtle Kong Color white
 Residence 8 George St. - Fairport, N.Y. Age 22 - 5/10/32
 Occupation Registered nurse - Hospital No. of marriage 1st
 Birthplace Fairport, N.Y. Former husband or husbands living or dead.
 Divorced Ernest Stewart Kong
 Birthplace U.S. " when
 " where U.S.
 " against whom Cora Myrtle Spefford
 Laboratory Statement Monroe Co. Lab. - Rochester, N.Y. Date 7/27/54
 Physician's Statement Wilbur S. Bushella - 20 W. Church St. - Fairport, N.Y. Date 7/23/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witnesses _____
 Period for solemnization of marriage begins at _____ A.M. on the _____ day of _____ 1954 and ends the _____ day of _____ 1954

Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 45
 Clerk Charlotte Clapp
 GROOM BRIDE

Name James Henry Ellison, Jr. Color white
 Residence 7 Ware St. - Cambridge, Mass. Age 28 - 7/25/26
 Occupation Engineer - Electronics No. of marriage 1st
 Birthplace Dallas, Texas Former wife or wives living or dead.
 Father James Henry Ellison Divorced
 Birthplace U.S. " when
 Mother Wilhelmina Short " where
 Birthplace U.S. " against whom
 Laboratory Statement Mass. Dept. of Public Health - Jamaica Plain - Massachusetts Date 7/9/54
 Physician's Statement Barclay H. Stone - 1101 Beacon St. - Brookline, Mass. Date 7/9/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 8/5/54 License 8/5/54 - 10:43 A.M. Marriage 8/7/54 3:30 P.M. Place of Marriage Fairport, N.Y.
 Official Robert B. Mann Profession Protestant Clergyman Witnesses Jane Payton Crutcher - Swarthmore, Pa. Nicholas De Wolf - 7 Ware St. - Cambridge, Mass.
 Period for solemnization of marriage begins at 12:15 A.M. on the 6 day of August 1954 and ends the 4 day of October 1954

Name Helen Jane Ditchison Color white
 Residence 8 Chaubey St. - Cambridge, Mass. Age 31 - 12/9/22
 Occupation Purchasing Agent - University No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead.
 Divorced George Cameron Ditchison
 Birthplace U.S. " when
 " where U.S.
 " against whom Minnie Roosen
 Laboratory Statement Mass. Dept. of Public Health - Jamaica Plain - Massachusetts Date 7/9/54
 Physician's Statement Barclay H. Stone - 1101 Beacon St. - Brookline, Mass. Date 7/9/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witnesses _____
 Period for solemnization of marriage begins at _____ A.M. on the _____ day of _____ 1954 and ends the _____ day of _____ 1954

City Town of Perinton County Monroe STATE OF NEW YORK No. 46
 Clerk Elizabeth H. Pierce
 GROOM BRIDE

Name Fred Lyons Letts Color Negro
 Residence 87 Nash St. - Rochester, N.Y. Age 25 - 1/19/29
 Occupation Corporal - U.S. Army No. of marriage 1st
 Birthplace Overgreen, Alabama Former wife or wives living or dead.
 Father Walter Letts Divorced
 Birthplace U.S. " when
 Mother Luddie Horn " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau - Roch., N.Y. Date 8/6/54
 Physician's Statement Priscilla C. Cummings - 260 Crittenden Blvd. - Roch., N.Y. Date 8/6/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 8/7/54 License 8/7/54 - 12:15 P.M. Marriage Aug 9 1954 9 P.M. Place of Marriage Rochester, N.Y.
 Official Rev. Eddie Tate Profession Minister Witnesses Arthur E. Wallis - 12 Nash St. - Rochester, N.Y.
 Period for solemnization of marriage begins at 12:15 P.M. on the 9 day of August 1954 and ends the 7 day of Oct. 1954

Name Beatrice Thurston Color Negro
 Residence 9 St. Clair St. - Rochester, N.Y. Age 17 - 2/11/37
 Occupation Nurse's aide - Hospital No. of marriage 1st
 Birthplace Holly Springs, Miss. Former husband or husbands living or dead.
 Divorced John Thurston
 Birthplace U.S. " when
 " where U.S.
 " against whom Lawrence Thompson
 Laboratory Statement Rochester Health Bureau - Roch., N.Y. Date 8/6/54
 Physician's Statement Priscilla C. Cummings - 260 Crittenden Blvd. - Roch., N.Y. Date 8/6/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation father Date 8/7/54
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witnesses _____
 Period for solemnization of marriage begins at _____ A.M. on the _____ day of _____ 1954 and ends the _____ day of _____ 1954

Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54
 Reported to state dept of health - Health 9/15/54

RECORD OF MARRIAGES

Reported to pd G. Stat. Dept. Health 9/1/54
mailed G. Stat. Dept. Health 9/15/54
Reported to pd G. Stat. Dept. Health 9/1/54
mailed G. Stat. Dept. Health 9/15/54
Reported to pd G. Stat. Dept. Health 9/1/54
mailed G. Stat. Dept. Health 9/15/54
Reported to pd G. Stat. Dept. Health 9/1/54
mailed G. Stat. Dept. Health 9/15/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 47
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Lynn Edward Dryer</u>	Color <u>white</u>	Name <u>Joan Frances Dean</u>	Color <u>white</u>
Residence <u>638 W. Whitson Rd. Fairport, N.Y.</u>	Age <u>21 - 2/8/33</u>	Residence <u>2490 Baird Rd. Fairport, N.Y.</u>	Age <u>21 - 5/17/33</u>
Occupation <u>Electronic - U.S. Coast Guard</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Brockport, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Warren Carlton Dryer</u>	Divorced	Father <u>Harry Jasper Dean</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Lucy Rebecca Brickels</u>	" where	Mother <u>Frances Suzanne Boyle</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Labs. - Rochester, N.Y.</u> Date <u>8/10/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Labs. - Rochester, N.Y.</u> Date <u>7/30/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai - Fairport, N.Y.</u> Date <u>8/7/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>John Kraai - Fairport, N.Y.</u> Date <u>7/27/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>8/12/54</u> License <u>8/12/54 - 2:33 P.M.</u> Marriage <u>Aug. 14 1954 3 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Lee Clelland</u> Profession <u>minister</u>		Official <u>Charles C. Dean</u> Profession <u>minister</u>	
Period for solemnization of marriage begins at <u>2:33 p.m.</u> on the <u>13</u> day of <u>August</u> 19 <u>54</u> and ends the <u>11</u> day of <u>October</u> 19 <u>54</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

City Town of Perinton County Monroe STATE OF NEW YORK No. 48
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Albert Jerome Pallini</u>	Color <u>white</u>	Name <u>Rose Ann Pasquale</u>	Color <u>white</u>
Residence <u>414 Johnson Ave. S. Rochester, N.Y.</u>	Age <u>20 5/20/34</u>	Residence <u>224 S. Maple Ave. E. Rochester, N.Y.</u>	Age <u>19 9/13/34</u>
Occupation <u>Stock Room Worker - Navy</u>	No. of marriage <u>1st</u>	Occupation <u>Typist - Telephone Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Brighton, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Vincenzo Pallini</u>	Divorced	Father <u>Jerald Pasquale</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Jessie Margaret Rovini</u>	" where	Mother <u>Lucy Platino</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories Rochester, N.Y.</u> Date <u>8/20/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories Rochester, N.Y.</u> Date <u>8/20/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Leo Hoffman - 207 S. Fairfield St. Rochester, N.Y.</u> Date <u>8/17/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Leo Hoffman - 207 S. Fairfield St. Rochester, N.Y.</u> Date <u>8/17/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by <u>Vincenzo Pallini</u> Relation <u>Father</u> Date <u>8/28/54</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Jessie Pallini</u> Relation <u>Mother</u> Date <u>8/28/54</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>8/28/54</u> License <u>8/28/54 - 10:39 A.M.</u> Marriage <u>9/11/54 - 9:00 A.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>		Official <u>Carmen Samuel Scalice, 118 E. 14th Ave. St. E. Rd. 207 S. Fairfield St. Rochester, N.Y.</u> Witness <u>Anne Dellino, 224 E. Maple St. E. Rochester, N.Y.</u>	
Period for solemnization of marriage begins at <u>10:39 A.M.</u> on the <u>29</u> day of <u>August</u> 19 <u>54</u> and ends the <u>27</u> day of <u>October</u> 19 <u>54</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

City Town of Perinton County Monroe STATE OF NEW YORK No. 49
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Harold Eugene Schue</u>	Color <u>white</u>	Name <u>Marilyn Belle Angara</u>	Color <u>white</u>
Residence <u>1454 Culbert Road Rochester, N.Y.</u>	Age <u>19 10 5/34</u>	Residence <u>7 Schenckman St Rochester, N.Y.</u>	Age <u>20 5/22/34</u>
Occupation <u>Private E 2 U.S. Army</u>	No. of marriage <u>1st</u>	Occupation <u>Office Clerk Retail Store</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Harry Murray Schue</u>	Divorced	Father <u>Santo Angara</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Jeanette Louise Verbridge</u>	" where	Mother <u>Dorothy Menter</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Rochester, N.Y.</u> Date <u>8/16/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Rochester Health Bureau Rochester, N.Y.</u> Date <u>8/16/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John F. Connor 902 Dewey Ave Rochester, N.Y.</u> Date <u>8/14/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>John F. Connor 902 Dewey Ave Rochester, N.Y.</u> Date <u>8/14/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by <u>Jeanette F. Schue</u> Relation <u>Mother</u> Date <u>8/28/54</u>		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation <u>sole guardian</u> Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>Aug. 28 1954</u> License <u>Aug 28 1954 11:19 A.M.</u> Marriage <u>Sept 25 1954 11:45</u> Place of Marriage <u>Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Ray J. W. Pyle</u> Profession <u>Catholic Priest</u>		Official <u>Paul F. May 1489 Culbert Road Rochester, N.Y.</u> Witness <u>Joan M. Rand 44 Weyand Street</u>	
Period for solemnization of marriage begins at <u>11:19 A.M.</u> on the <u>29</u> day of <u>August</u> 19 <u>54</u> and ends the <u>27</u> day of <u>October</u> 19 <u>54</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

RECORD OF MARRIAGES

Reported to State Dept of Health 9/1/54
mailed to State Dept of Health 10/5/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 50
 Clerk Elizabeth A. Purce

GROOM		BRIDE	
Name <u>John Joseph Kubek</u>	Color <u>White</u>	Name <u>Judith Frances Parratto</u>	Color <u>White</u>
Residence <u>330 N. 9th St. Rochester NY</u>	Age <u>19</u> 3/20/35	Residence <u>427 Williams St. Rochester NY</u>	Age <u>19</u> 12/3/37
Occupation <u>Steel Club - TV Factory</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Pottsville Pa.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>John Simon Kubek</u>	Divorced	Father <u>Joseph Parratto</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Mary Helen Fusko</u>	" where	Mother <u>Rosa Mancuso</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Lab 435 E. Henrietta Rd Rochester NY</u>	Date <u>8/20/54</u>	Laboratory Statement <u>Monroe Co. Lab 435 E. Henrietta Rd Rochester NY</u>	Date <u>8/20/54</u>
Physician's Statement <u>Jerome N. Amante 239 W. Ave Rochester NY</u>	Date <u>8/16/54</u>	Physician's Statement <u>Jerome N. Amante 239 W. Ave Rochester NY</u>	Date <u>8/16/54</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by <u>Mary H. Kubek</u> Relation <u>Mother</u> Date <u>8/28/54</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>John S. Kubek</u> Relation <u>Father</u> Date <u>8/28/54</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u>		Proof of age <u>Certification of Birth</u>	
Date: Affidavit <u>8/28/54</u> License <u>8/28/54</u> 11:45 a.m. Marriage <u>Sept 4 1954</u> 12:00 p.m.		Date: Affidavit _____ License _____ _____ a.m. Marriage <u>Sept 4 1954</u> _____ p.m.	
Official <u>Rev. Roy B. Murphy</u> Profession <u>Catholic Priest</u>		Official <u>Small G. Smith</u> Profession <u>Minister of the Gospel</u>	
Period for solemnization of marriage begins at <u>11:45 A.M.</u> on the <u>29</u> day of <u>August</u> 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

Reported to State Dept of Health 10/1/54
mailed to State Dept of Health 10/5/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 51
 Clerk Elizabeth A. Purce

GROOM		BRIDE	
Name <u>Bruce Edward Gailey</u>	Color <u>White</u>	Name <u>Barbara Ann Willink</u>	Color <u>White</u>
Residence <u>2036 First Mile Rd. Perfield NY</u>	Age <u>19</u> 1/10/35	Residence <u>2029 First Mile Rd. Perfield NY</u>	Age <u>17</u> 11/9/36
Occupation <u>Student - College</u>	No. of marriage <u>1st</u>	Occupation <u>Student - College</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester NY</u>	Former wife or wives living or dead	Birthplace <u>Perfield NY</u>	Former husband or husbands living or dead
Father <u>Alford Miller Gailey</u>	Divorced	Father <u>Ross John Willink</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Frances Virginia Brangan</u>	" where	Mother <u>Harnet Brown Ochenden</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>9/8/54</u>	Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>9/8/54</u>
Physician's Statement <u>George F. Bartleson 2036 First Mile Rd. Perfield NY</u>	Date <u>9/7/54</u>	Physician's Statement <u>George F. Bartleson 2036 First Mile Rd. Perfield NY</u>	Date <u>9/7/54</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by <u>Alford M. Gailey</u> Relation <u>Father</u> Date <u>9/10/54</u>		Consent by <u>Harnet B. Willink</u> Relation <u>Mother</u> Date <u>9/10/54</u>	
Consent by <u>Frances B. Gailey</u> Relation <u>Mother</u> Date <u>9/10/54</u>		Consent by <u>(father dead)</u> Relation _____ Date _____	
Proof of age <u>Certification of Birth</u>		Proof of age <u>Certification of Birth</u>	
Date: Affidavit <u>Sept 10 1954</u> License <u>Sept 10 1954</u> 12:32 p.m. Marriage <u>Sept 11 1954</u> 8:00 a.m.		Date: Affidavit _____ License _____ _____ p.m. Marriage <u>Sept 11 1954</u> _____ a.m.	
Official <u>Rev. Elwyn D. Brown</u> Profession <u>Chaplain</u>		Official <u>Sam Willink</u> Profession <u>Minister of the Gospel</u>	
Period for solemnization of marriage begins at <u>12:32 p.m.</u> on the _____ day of <u>Sept</u> 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

Reported to State Dept of Health 10/1/54
mailed to State Dept of Health 10/5/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 52
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Gaspare Dianetti</u>	Color <u>White</u>	Name <u>Raffaella Lena Sacco</u>	Color <u>White</u>
Residence <u>1305 N. Mendon Road S. Rochester NY</u>	Age <u>24</u> 4/14 1930	Residence <u>403 1/2 S. Garfield St. S. Rochester NY</u>	Age <u>19</u> 1/24/35
Occupation <u>Service Manager - Automatic Wash</u>	No. of marriage <u>1st</u>	Occupation <u>Clinical - Office</u>	No. of marriage <u>1st</u>
Birthplace <u>S. Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Brighton N.Y.</u>	Former husband or husbands living or dead
Father <u>Florindo Dianetti</u>	Divorced	Father <u>Matthew Sacco</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Emilia Costantini</u>	" where	Mother <u>Theresa Mary Croco</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>9/1/54</u>	Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>9/1/54</u>
Physician's Statement <u>Charles R. Harris 38 West Ave Rochester NY</u>	Date <u>8/30/54</u>	Physician's Statement <u>Charles R. Harris 115 West Ave Rochester NY</u>	Date <u>8/30/54</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u>		Proof of age <u>Certification of Birth</u>	
Date: Affidavit <u>Sept 11 1954</u> License <u>Sept 11 1954</u> 11:27 a.m. Marriage <u>9/18/54</u> 10:15 a.m.		Date: Affidavit _____ License _____ _____ a.m. Marriage <u>9/18/54</u> _____ a.m.	
Official <u>Gaspare A. Cecconi</u> Profession <u>Catholic Priest</u>		Official <u>Jerome N. Montagnano 30 Orange St. Rochester NY</u> Profession <u>Minister of the Gospel</u>	
Period for solemnization of marriage begins at <u>11:27 A.M.</u> on the <u>12</u> day of <u>Sept</u> 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 53
Town Clerk Charlotte Claff

Reported - old to state health 10/1/54
mailed to state dept of health 10/5/54

GROOM		BRIDE	
Name <u>Harrison Hull</u>	Color <u>White</u>	Name <u>Carol Goodrich</u>	Color <u>White</u>
Residence <u>10 Ox Bow Road Fairport NY</u>	Age <u>21</u> 11/8/32	Residence <u>203 E. Linden Ave. E. Rochester NY</u>	Age <u>18</u> 9/26/35
Occupation <u>Sailor U.S. Navy</u>	No. of marriage <u>1st</u>	Occupation <u>Clock Store Rochester NY</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester NY</u>	Former husband or husbands living or dead
Father <u>Harvey Hull</u>	Divorced	Father <u>John William Goodrich</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Violet Catherine Delano</u>	" where	Mother <u>Isella Florence Vogt</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Lab. 435 E. Nematta Road Rochester 20 NY</u> Date <u>9/8/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Lab. 435 E. Nematta Road Rochester 20 NY</u> Date <u>8/31/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>William S. Bullett Fairport NY</u> Date <u>9/4/54</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Dr. Leo Hoffman E. Rochester NY</u> Date <u>8/27/54</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 11 1954</u> License <u>Sept 11 1954</u> 10:08 A.M. Marriage <u>Sept 25 1954</u> 11 A.M. Place of Marriage <u>East Rochester NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Anthony F. Calmes</u> Profession <u>Catholic Priest</u>		Official <u>Barclay R. Williams</u> Profession <u>U.S. Army</u>	
Period for solemnization of marriage begins at <u>10:08</u> A.M. on the <u>12</u> day of <u>Sept</u> 19 <u>54</u> and ends the <u>10</u> day of <u>Nov</u> 19 <u>54</u>		Period for solemnization of marriage begins at _____ A.M. on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

City Town of Perinton County Monroe STATE OF NEW YORK No. 54
Town Clerk Elizabeth H. Pierce

Reported - old to state health 10/1/54
mailed to state dept of health 10/5/54

GROOM		BRIDE	
Name <u>Arnold Kenneth Westerman</u>	Color <u>White</u>	Name <u>Gene Marion Haagen</u>	Color <u>White</u>
Residence <u>Macedon Center Road Fairport NY</u>	Age <u>40</u> 3/17/14	Residence <u>43 Phelps Ave. Rochester NY</u>	Age <u>36</u> 11/2/17
Occupation <u>Mechanic Garage</u>	No. of marriage <u>1st</u>	Occupation <u>Laboratory Detroit Mich.</u>	No. of marriage <u>2nd</u>
Birthplace <u>Pomfret NY</u>	Former wife or wives living or dead	Birthplace <u>Detroit Mich.</u>	Former husband or husbands living or dead
Father <u>Lawrence Ely Westerman</u>	Divorced	Father <u>Joseph Mazurek</u>	Divorced <u>yes</u>
Birthplace <u>U.S.</u>	" when	Birthplace <u>Poland</u>	" when <u>Sept 16 1949</u>
Mother <u>Georgia J. Norton</u>	" where	Mother <u>Mary Gussakowski</u>	" where <u>Monroe Co. NY</u>
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom <u>Monroe Co. NY</u>
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Nematta Road Rochester NY</u> Date <u>9/3/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Nematta Road Rochester NY</u> Date <u>9/3/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai Fairport NY</u> Date <u>8/31/54</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraai Fairport NY</u> Date <u>8/31/54</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>9/11/54</u> License <u>9/11/54</u> 9:39 A.M. Marriage <u>Sept 12 1954</u> 11:20 A.M. Place of Marriage <u>Macedon NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Ernest S. Spafford</u> Profession <u>Justice of the Peace</u>		Official <u>Harry Kurek</u> Profession <u>Justice of the Peace</u>	
Period for solemnization of marriage begins at <u>9:39</u> A.M. on the <u>12</u> day of <u>Sept</u> 19 <u>54</u> and ends the <u>10</u> day of <u>Nov</u> 19 <u>54</u>		Period for solemnization of marriage begins at _____ A.M. on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

City Town of Perinton County Monroe STATE OF NEW YORK No. 55
Town Clerk Elizabeth H. Pierce

Reported - old to state health 10/1/54
mailed to state dept of health 10/5/54

GROOM		BRIDE	
Name <u>Salvatore Amunini</u>	Color <u>White</u>	Name <u>Annabelle Louy</u>	Color <u>White</u>
Residence <u>72 East Ave. Fairport NY</u>	Age <u>30</u> 4/19/24	Residence <u>221 East Ave. E. Rochester NY</u>	Age <u>21</u> 2/27/33
Occupation <u>Musicians Orchestra</u>	No. of marriage <u>1st</u>	Occupation <u>Operator Telephone Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport NY</u>	Former wife or wives living or dead	Birthplace <u>Manchester NY</u>	Former husband or husbands living or dead
Father <u>Benedetto Amunini</u>	Divorced	Father <u>Joseph Louy</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Cosetta Rinaldo</u>	" where	Mother <u>Carmela Lenzi</u>	" where
Birthplace <u>Africa (Yvesia)</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Nematta Road Rochester</u> Date <u>9/10/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Nematta Road Rochester</u> Date <u>9/10/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Leo Hoffman E. Rochester NY</u> Date <u>9/8/54</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Leo Hoffman E. Rochester NY</u> Date <u>9/8/54</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 14 1954</u> License <u>Sept 14 1954</u> 5:05 A.M. Marriage <u>Sept 25 1954</u> 9 A.M. Place of Marriage <u>East Rochester NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Rev. Roy B. Murphy</u> Profession <u>Catholic Priest</u>		Official <u>Louis Amunini</u> Profession <u>Justice of the Peace</u>	
Period for solemnization of marriage begins at <u>5:05</u> A.M. on the <u>15</u> day of <u>Sept</u> 19 <u>54</u> and ends the <u>13</u> day of <u>November</u> 19 <u>54</u>		Period for solemnization of marriage begins at _____ A.M. on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>54</u>	

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 56
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Elmer Glen Sharp</u>	Color <u>White</u>	Name <u>Lois Ann Fawcett</u>	Color <u>White</u>
Residence <u>605 Jefferson Ave Fairport NY</u>	Age <u>27</u> <u>7/5/27</u>	Residence <u>5 Oakland Park Dr Fairport NY</u>	Age <u>24</u> <u>3/23/30</u>
Occupation <u>Film Technician - Kodak Factory</u>	No. of marriage <u>1st</u>	Occupation <u>Constantly in dentist's office</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester NY</u>	Former husband or husbands living or dead
Father <u>George Alfred Sharp</u>	Divorced	Father <u>Charles Ellsworth Fawcett</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Natalie Marie Shea</u>	" where	Mother <u>Pearl Irene Kohl</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Lab. 435 E. Henrietta Rd. Rochester 20 NY</u> Date <u>Sept 23 1954</u>	Date <u>Sept 23 1954</u>	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester 20 NY</u> Date <u>Sept 21 1954</u>	Date <u>Sept 21 1954</u>
Physician's Statement <u>Francis Pratt 14 W. Church St. Fairport NY</u> Date <u>Sept 8 1954</u>	Date <u>Sept 8 1954</u>	Physician's Statement <u>J. H. McEachern 70 S. Main St Fairport NY</u> Date <u>Sept 8 1954</u>	Date <u>Sept 8 1954</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____		Proof of age _____	
Date: Affidavit <u>Sept 22 1954</u> License <u>Sept 22 1954</u> 1:36 P.M. Marriage		Date: Affidavit <u>10/2/54</u> 2 P.M. Place of Marriage <u>Fairport, N.Y.</u>	
Official <u>Alvin C. Foster</u> Profession <u>Minister</u>		Official <u>Paula Epstein Cohen</u> Profession <u>Pittsford, N.Y.</u>	
Period for solemnization of marriage begins at <u>1:36 P.M.</u> on the <u>23</u> day of <u>Sept.</u> 1954 and ends the <u>21</u> day of <u>November</u> 1954		Witness <u>Henrietta J. Kahlen - Santa Monica, Calif.</u>	

mailed to State Dept + Health 11/5/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 57
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Albert Umberto Mammone</u>	Color <u>White</u>	Name <u>Maria America De Ciantis</u>	Color <u>White</u>
Residence <u>330 Canal Ave. N.W. Canton Ohio</u>	Age <u>32</u> <u>7/31/22</u>	Residence <u>345 N. Washington St. E. Rochester NY</u>	Age <u>31</u> <u>6/4/23</u>
Occupation <u>Tinner - Auto Factory</u>	No. of marriage <u>1st</u>	Occupation <u>Sales Factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Sora Italy</u>	Former wife or wives living or dead	Birthplace <u>Sora Italy</u>	Former husband or husbands living or dead
Father <u>Giuseppe Mammone</u>	Divorced	Father <u>Giuseppe De Ciantis</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Colomba Marcelli</u>	" where	Mother <u>Filomena Baldassara</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester 20 NY</u> Date <u>9/14/54</u>	Date <u>9/14/54</u>	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester 20 NY</u> Date <u>9/14/54</u>	Date <u>9/14/54</u>
Physician's Statement <u>D. A. R. Hurley E. Rochester NY</u> Date <u>9/11/54</u>	Date <u>9/11/54</u>	Physician's Statement <u>D. A. R. Hurley E. Rochester NY</u> Date <u>9/11/54</u>	Date <u>9/11/54</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____		Proof of age _____	
Date: Affidavit <u>Sept 23 1954</u> License <u>Sept 23 1954</u> 10:08 A.M. Marriage		Date: Affidavit <u>Sept 25 1954</u> 10 A.M. Place of Marriage <u>East Rochester, N.Y.</u>	
Official <u>Anthony F. Calimeri</u> Profession <u>Catholic Priest</u>		Official <u>Anthony De Ciantis</u> Profession <u>207 E. Linden Ave. E. Rochester NY</u>	
Period for solemnization of marriage begins at <u>10:08 A.M.</u> on the <u>24</u> day of <u>September</u> 1954 and ends the <u>22</u> day of <u>November</u> 1954		Witness <u>James De Ciantis 207 E. Linden Ave. E. Rochester NY</u>	

mailed to State Dept + Health 10/5/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 58
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Robert Elliott Coomber</u>	Color <u>White</u>	Name <u>Florence Mae Colwell</u>	Color <u>White</u>
Residence <u>9th and E. A. Fairport, NY</u>	Age <u>20</u> <u>5/6/34</u>	Residence <u>81 High St. - Yonkers - N.Y.</u>	Age <u>20</u> <u>9/27/34</u>
Occupation <u>Office Worker - Trucking</u>	No. of marriage <u>1st</u>	Occupation <u>Clerk - Finance</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Yonkers, N.Y.</u>	Former husband or husbands living or dead
Father <u>Raymond Alonzo Coomber</u>	Divorced	Father <u>Frederick Lewis Colwell</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Yettie Louise Freeborn</u>	" where	Mother <u>Mildred Elizabeth Russell</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester 20 NY</u> Date <u>9/28/54</u>	Date <u>9/28/54</u>	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>9/28/54</u>	Date <u>9/28/54</u>
Physician's Statement <u>George A. Dean 11 W. Church St. Fairport, N.Y.</u> Date <u>9/25/54</u>	Date <u>9/25/54</u>	Physician's Statement <u>George A. Dean - 11 W. Church St. Fairport, N.Y.</u> Date <u>9/25/54</u>	Date <u>9/25/54</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by <u>Louise F. Coomber</u> Relation <u>mother</u> Date <u>10/1/54</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Raymond A. Coomber</u> Relation <u>father</u> Date <u>10/1/54</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u>		Proof of age <u>Certification of Birth</u>	
Date: Affidavit <u>10/1/54</u> License <u>10/1/54</u> 8:08 P.M. Marriage		Date: Affidavit <u>10/16/54</u> 1:00 P.M. Place of Marriage <u>Fairport, N.Y.</u>	
Official <u>Clayton D. Brown</u> Profession <u>Clergyman</u>		Official <u>Arline Campese</u> Profession <u>207 E. Linden Ave. E. Rochester, N.Y.</u>	
Period for solemnization of marriage begins at <u>9:10 P.M.</u> on the <u>2nd</u> day of <u>October</u> 1954 and ends the <u>3rd</u> day of <u>November</u> 1954		Witness <u>James Sweet - 224 W. Main St. - Palmyra, N.Y.</u>	

mailed to State Dept + Health 11/5/54

RECORD OF MARRIAGES

City Town of Perinton county Monroe STATE OF NEW YORK No. 59
Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Frederick Leach Harvey</u>	Color <u>white</u>	Name <u>Helen Anna Petty</u>	Color <u>white</u>
Residence <u>RD 2 Cortland, N.Y.</u>	Age <u>39</u> 1/10/15	Residence <u>3 Grace St., Rochester, N.Y.</u>	Age <u>39</u> 5/2/15
Occupation <u>Woodworker - factory</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>3rd</u>
Birthplace <u>Marathon, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Springwater, N.Y.</u>	Former husband or husbands living or dead <u>living</u>
Father <u>Fred Harvey</u>	Divorced	Divorced <u>yes</u>	When <u>June 1945</u> <u>June 5, 1953</u>
Birthplace <u>U.S.</u>	" when	Where <u>Monroe Co. Monroe Co.</u>	" where
Mother <u>Pearl Leach</u>	" where	Against whom <u>Henry Petty</u>	" against whom
Birthplace <u>U.S.</u>	" against whom		
Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>9/24/54</u>	Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>9/24/54</u>
Physician's Statement <u>Norman M. Deussen - 27 W. Hopman St. Rochester, N.Y.</u>	Date <u>9/22/54</u>	Physician's Statement <u>Norman M. Deussen - 27 W. Hopman St. Rochester, N.Y.</u>	Date <u>9/22/54</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>10/5/54</u>	License <u>10/6/54-10:28 A.M.</u>	Marriage <u>10/23/54-3:00 P.M.</u>	Place of Marriage <u>Salem, Washington Co., N.Y.</u>
Official <u>Harry Lytle</u>	Profession <u>Justice of Peace</u>	Witness <u>Marion Merrill, Schuylerville, N.Y.</u>	
Period for solemnization of marriage begins at <u>10:28 A.M.</u> on the <u>7</u> day of <u>October</u> 19 <u>54</u> and ends the <u>5</u> day of <u>December</u> 19 <u>54</u>			

mailed to State Dept. Reprinted + pd to State Dept + Health 11/5/54

City Town of Perinton county Monroe STATE OF NEW YORK No. 60
Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Emanuel Francis Pieramico</u>	Color <u>white</u>	Name <u>Susan Doran</u>	Color <u>white</u>
Residence <u>229 E. Elm St. - Rochester, N.Y.</u>	Age <u>23</u> 10/29/30	Residence <u>11 Orchard St. - Fairport, N.Y.</u>	Age <u>21</u> 9/12/33
Occupation <u>Inspector - Kodak factory</u>	No. of marriage <u>1st</u>	Occupation <u>Spooler - Kodak factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead
Father <u>Alfred Pieramico</u>	Divorced	Divorced	
Birthplace <u>Brazil</u>	" when	Where <u>U.S.</u>	" where
Mother <u>Josephine Ann Audino</u>	" where	Against whom <u>Stella Campbell</u>	" against whom
Birthplace <u>Sicily</u>	" against whom		
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u>	Date <u>10/8/54</u>	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u>	Date <u>10/8/54</u>
Physician's Statement <u>Wilbur S. Bucholtz - 20 W. Church St. Fairport, N.Y.</u>	Date <u>10/6/54</u>	Physician's Statement <u>Wilbur S. Bucholtz - 20 W. Church St. Fairport, N.Y.</u>	Date <u>10/6/54</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>10/13/54</u>	License <u>10/13/54-9:41 A.M.</u>	Marriage <u>10/16/54-1:00 P.M.</u>	Place of Marriage <u>Fairport, N.Y.</u>
Official <u>Leonard A. Kelly</u>	Profession <u>Catholic Priest</u>	Witness <u>Marie Jane Allen - 23 Baggins Ave. - Fairport, N.Y.</u>	
Period for solemnization of marriage begins at <u>11 A.M.</u> on the <u>14</u> day of <u>October</u> 19 <u>54</u> and ends the <u>13</u> day of <u>December</u> 19 <u>54</u>			

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City Town of Perinton county Monroe STATE OF NEW YORK No. 61
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Francis Michael Hartigan</u>	Color <u>white</u>	Name <u>Joan Louise Torney</u>	Color <u>white</u>
Residence <u>18 De Land Pl. B. - Fairport, N.Y.</u>	Age <u>30</u> 8/18/24	Residence <u>72 Blac. Dr. - Rochester, N.Y.</u>	Age <u>33</u> 1/23/21
Occupation <u>Salesman - Manufacturing</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary - Photographer</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Bridgeport, Conn.</u>	Former husband or husbands living or dead
Father <u>Frank Joe Hartigan</u>	Divorced	Divorced	
Birthplace <u>U.S.</u>	" when	Where <u>U.S.</u>	" where
Mother <u>Anna Elizabeth Burns</u>	" where	Against whom <u>Genevieve A. Hiver</u>	" against whom
Birthplace <u>U.S.</u>	" against whom		
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u>	Date <u>10/8/54</u>	Laboratory Statement <u>Rochester Health Bureau Laboratory</u>	Date <u>9/29/54</u>
Physician's Statement <u>Wilbur S. Bucholtz - 20 W. Church St. Fairport, N.Y.</u>	Date <u>10/5/54</u>	Physician's Statement <u>James M. Stewart - 344 West Ave., Rochester, N.Y.</u>	Date <u>9/28/54</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>10/16/54</u>	License <u>10/16/54-10:32 A.M.</u>	Marriage <u>10/22/54-9:00 A.M.</u>	Place of Marriage <u>Rochester, N.Y.</u>
Official <u>Wm. J. Naughton</u>	Profession <u>Roman Catholic Priest</u>	Witness <u>William T. Hartigan - 18 De Land Pl. B. - Fairport, N.Y.</u>	
Period for solemnization of marriage begins at <u>10:32 A.M.</u> on the <u>17</u> day of <u>October</u> 19 <u>54</u> and ends the <u>15</u> day of <u>December</u> 19 <u>54</u>			

mailed to State Dept. Reprinted + pd to State Dept + Health 11/5/54

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 62

Clerk Elizabeth H. Pierce

GROOM

Name Iraed Albert Deuel Color White
 Residence 158 W. Main St. - Fairport, N.Y. Age 24 - 10/13/30
 Occupation Maintenance - factory No. of marriage 1st
 Birthplace Macedon, N.Y. Former wife or wives living or dead
 Father Chester Albert Deuel Divorced
 Birthplace U.S. " when
 Mother Helen Marie Althea Teeter " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 10/19/54 (Test completed)
 Physician's Statement J. H. McPachem - 70 S. Main St. - Fairport, N.Y. Date 10/15/54 (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit 10/23/54 License 10/23/54 - 10:32 AM Marriage 10/29/54 - 7:00 P.M. Place of Marriage Fairport, N.Y.
 Official Albert D. Annunzio Profession Clergyman 38 E. Church St. - Fairport, N.Y.
 Period for solemnization of marriage begins at 10:32 A.M. on the 24 day of October 1954 and ends the 22 day of December 1954.

BRIDE

Name Annabelle Sawidge Color White
 Residence 601 S. Washington St. - Rochester, N.Y. Age 19 - 2/9/35
 Occupation IBM Operator - factory No. of marriage 1st
 Birthplace East Rochester, N.Y. Former husband or husbands living or dead
 Divorced
 " when
 " where
 " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 10/19/54 (Test completed)
 Physician's Statement J. H. McPachem - 70 S. Main St. - Fairport, N.Y. Date 10/15/54 (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage 10/29/54 - 7:00 P.M. Place of Marriage Fairport, N.Y.
 Official Richard H. Deane Profession Justice 115 N. Main St. - Fairport, N.Y.
 Witness Jean B. Perica - 227 E. Commercial St. - Rochester, N.Y.
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1954 and ends the _____ day of _____ 1954.

City Town of Perinton County Monroe STATE OF NEW YORK No. 63

Clerk Elizabeth H. Pierce

GROOM

Name Edward Francis Drock Color White
 Residence 105 Clifford Ave., Rochester, N.Y. Age 21 - 4/7/33
 Occupation Repair - Roofing Company No. of marriage 1st
 Birthplace Batavia, N.Y. Former wife or wives living or dead
 Father Frank Ira Drock Divorced
 Birthplace U.S. " when
 Mother Jenny Louise Greenbaum " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 10/26/54 (Test completed)
 Physician's Statement Leo Hoffman - Eyer Bldg. - Rochester, N.Y. Date 10/22/54 (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit 10/27/54 License 10/27/54 - 3:37 P.M. Marriage 10/29/54 - 4:00 P.M. Place of Marriage East Rochester, N.Y.
 Official Roy B. Murphy Profession Catholic Priest 211 W. State St. - Rochester, N.Y.
 Witness Yvonne M. Blair - 225 W. Hickory St. - Rochester, N.Y.
 Period for solemnization of marriage begins at 3:37 P.M. on the 28 day of October 1954 and ends the 26 day of December 1954.

BRIDE

Name Faye Ann Blair Color White
 Residence 245 W. Hickory St. - Rochester, N.Y. Age 18 - 9/29/36
 Occupation Clerical - Telephone Company No. of marriage 1st
 Birthplace East Rochester, N.Y. Former husband or husbands living or dead
 Divorced
 " when
 " where
 " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 10/26/54 (Test completed)
 Physician's Statement Leo Hoffman - Eyer Bldg. - Rochester, N.Y. Date 10/22/54 (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage 10/29/54 - 4:00 P.M. Place of Marriage East Rochester, N.Y.
 Official Harry F. Blair Profession Justice 211 W. State St. - Rochester, N.Y.
 Witness Yvonne M. Blair - 225 W. Hickory St. - Rochester, N.Y.
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1954 and ends the _____ day of _____ 1954.

City Town of Perinton County Monroe STATE OF NEW YORK No. 64

Clerk Elizabeth H. Pierce

GROOM

Name Silas Marion Dye Color White
 Residence 1659 State Rd. - Webster, N.Y. Age 50 - 6/20/04
 Occupation Salesman - Feed No. of marriage 2nd
 Birthplace Liberty, Kentucky Former wife or wives living or dead dead
 Father Hollis Dye Divorced
 Birthplace U.S. " when
 Mother Maggie Dick " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 10/26/54 (Test completed)
 Physician's Statement Edwin Kriedemann - 74 S. Main St. - Pittsford, N.Y. Date 10/22/54 (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit 10/29/54 License 10/29/54 - 9:57 A.M. Marriage 10/30/54 - 2:00 P.M. Place of Marriage Fairport, N.Y.
 Official Albert D. Annunzio Profession Clergyman 38 E. Church St. - Fairport, N.Y.
 Witness Anna E. Finley - 2629 Penfield Rd. - Fairport, N.Y.
 Period for solemnization of marriage begins at 9:57 A.M. on the 30 day of October 1954 and ends the 28 day of December 1954.

BRIDE

Name Lillian Stanton Color White
 Residence 335 Linden Ave., Rochester, N.Y. Age 44 - 4/13/10
 Occupation at home No. of marriage 2nd
 Birthplace Warrensburg, N.Y. Former husband or husbands living or dead dead
 Divorced
 " when
 " where
 " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 10/26/54 (Test completed)
 Physician's Statement Edwin Kriedemann - 74 S. Main St. - Pittsford, N.Y. Date 10/22/54 (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage 10/30/54 - 2:00 P.M. Place of Marriage Fairport, N.Y.
 Official Edwin Kriedemann Profession Justice 74 S. Main St. - Pittsford, N.Y.
 Witness Anna E. Finley - 2629 Penfield Rd. - Fairport, N.Y.
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1954 and ends the _____ day of _____ 1954.

Referred to State Dept. 11/1/54
 Referred to State Dept. 12/16/54
 Referred to State Dept. 11/5/54
 Referred to State Dept. 11/1/54
 Referred to State Dept. 12/16/54
 Referred to State Dept. 11/1/54

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 65
 Town Clerk Charlotte Clapp

GROOM

Name Richard Steven Malone Color white
 Residence 69 Park Ave - Fairport, N.Y. Age 21 - 8/10/33
 Occupation Carpenter - Lakeland - U.S. Air Force
 Birthplace Syona, N.Y. No. of marriage 1st
 Former wife or wives living or dead
 Father John Thomas Malone Divorced
 Birthplace U.S. " when
 Mother Mildred Mae Brinkerhoff " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta Rd. 11/2/54
 (Name and address of laboratory) (Test completed)
 Physician's Statement J. W. McEachern - 70 S. Main St. 11/2/54
 (Name and address of physician) (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 11/7/54 License 11/7/54 - 9:55 AM Marriage 11/12/54 - 7:00 PM Place of Marriage Fairport, N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
 Official Robert B. Mann Profession Protestant Clergyman Witness Suzanne Holt - 393 Barrington St. - Roch. N.Y.
 1 Clifford St. - Fairport, N.Y. Witness Richard Malone - 67 Park Ave. - Fairport, N.Y.
 Period for solemnization of marriage begins at 9:55 AM on the 7 day of November 1954 and ends the 6 day of January 1955.

BRIDE

Name Nancy Irene Holt Color white
 Residence 393 Barrington St. - Rochester, N.Y. Age 21 - 4/29/33
 Occupation Secretary - Electrical
 Birthplace East Rochester, N.Y. No. of marriage 2nd
 Former husband or husbands living or dead Living
 Cumulated yes
 Divorced yes
 Father Edgar Crossdale Holt Divorced
 Birthplace U.S. " when 7/15/54
 Mother Helen Nancy Culbertson " where Wayne Co.
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta Rd. 11/3/54
 (Name and address of laboratory) (Test completed)
 Physician's Statement J. W. McEachern - 70 S. Main St. - Fairport, N.Y. 11/2/54
 (Name and address of physician) (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 11/7/54 License 11/7/54 - 9:55 AM Marriage 11/12/54 - 7:00 PM Place of Marriage Fairport, N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
 Official Robert B. Mann Profession Protestant Clergyman Witness Suzanne Holt - 393 Barrington St. - Roch. N.Y.
 1 Clifford St. - Fairport, N.Y. Witness Richard Malone - 67 Park Ave. - Fairport, N.Y.
 Period for solemnization of marriage begins at 9:55 AM on the 7 day of November 1954 and ends the 6 day of January 1955.

Reported to State Def + Health 12/1/54
 Reported to State Def + Health 12/16/54
 Reported to State Def + Health 12/16/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 66
 Town Clerk Charlotte Clapp

GROOM

Name Remeth Willis Hall Color white
 Residence 109 William St. - Rochester, N.Y. Age 21 - 3/12/33
 Occupation Mechanical Engineer - Automobile
 Birthplace East Rochester, N.Y. No. of marriage 1st
 Former wife or wives living or dead
 Father Willis Raymond Hall Divorced
 Birthplace U.S. " when
 Mother Hedys Yatis " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta Rd. 11/9/54
 (Name and address of laboratory) (Test completed)
 Physician's Statement George A. Deary - 11 W. Church St. 11/6/54
 (Name and address of physician) (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 11/13/54 License 11/13/54 - 11:30 AM Marriage Nov. 27 1954 10 AM Place of Marriage Pittsford N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
 Official John A. Reddington Profession Catholic Priest Witness Mr. Richard Pritchett - 630 William St. - Elmira, N.Y.
 111 W. Main St. - Fairport, N.Y. Witness Mr. Eugene A. Wall - 499 Jefferson Ave. - Fairport, N.Y.
 Period for solemnization of marriage begins at 11:30 A.M. on the 14 day of November 1954 and ends the 12 day of January 1955.

BRIDE

Name Ellen Ann Specht Color white
 Residence 37 Cuseant Rd. - Fairport, N.Y. Age 19 - 2/21/35
 Occupation Student - Business Institute
 Birthplace Rochester, N.Y. No. of marriage 1st
 Former husband or husbands living or dead
 Father Richard Matthew Specht Divorced
 Birthplace U.S. " when
 Mother Pauline Elizabeth Wilkerson " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta Rd. 11/9/54
 (Name and address of laboratory) (Test completed)
 Physician's Statement Erich Jacobson - 10 E. Church St. - Fairport, N.Y. 11/6/54
 (Name and address of physician) (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 11/13/54 License 11/13/54 - 11:30 AM Marriage Nov. 27 1954 10 AM Place of Marriage Pittsford N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
 Official John A. Reddington Profession Catholic Priest Witness Mr. Richard Pritchett - 630 William St. - Elmira, N.Y.
 111 W. Main St. - Fairport, N.Y. Witness Mr. Eugene A. Wall - 499 Jefferson Ave. - Fairport, N.Y.
 Period for solemnization of marriage begins at 11:30 A.M. on the 14 day of November 1954 and ends the 12 day of January 1955.

Reported to State Def + Health 12/1/54
 Reported to State Def + Health 12/16/54
 Reported to State Def + Health 12/16/54

City Town of Perinton County Monroe STATE OF NEW YORK No. 67
 Town Clerk Elizabeth M. Pierce

GROOM

Name Carl Willis Delp Color white
 Residence RD # 3 - Tannagua, Schuylkill Age 21 - 9/12/33
 Occupation Mechanic - U.S. Air Force
 Birthplace Tannagua, Penna. No. of marriage 1st
 Former wife or wives living or dead
 Father Paul Forgaire Delp Divorced
 Birthplace U.S. " when
 Mother Katherine Sue Shellhammer " where
 Birthplace U.S. " against whom
 Laboratory Statement Base Dispensary, Kirkland A.F.B. 11/8/54
 (Name and address of laboratory) (Test completed)
 Physician's Statement Wilbur S. Buckholtz - 20 W. Church St. 11/4/54
 (Name and address of physician) (Specimens taken)
 Examination requirements were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 11/15/54 License 11/15/54 - 4:07 PM Marriage 11/20/54 - 2:00 PM Place of Marriage Fairport, N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
 Official Lawrence P. Delp Profession Clergyman Witness James H. Berrant - Rochester, N.Y.
 12 Perryburg, Penna. Witness Donald J. Fisher - 700 Ringgold, Penna.
 Period for solemnization of marriage begins at 4:07 P.M. on the 16 day of Nov. 1954 and ends the 14 day of Jan. 1955.

BRIDE

Name Eleonor Renner Color white
 Residence Road Mendon Pa. Rd. - Honeyvale, N.Y. Age 21 - 4/7/33
 Occupation at home
 Birthplace Rochester, N.Y. No. of marriage 1st
 Former husband or husbands living or dead
 Father Unknown Divorced
 Birthplace U.S. " when
 Mother Unknown " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta Rd. 11/5/54
 (Name and address of laboratory) (Test completed)
 Physician's Statement Wilbur S. Buckholtz - 20 W. Church St. - Fairport, N.Y. 11/2/54
 (Name and address of physician) (Specimens taken)
 Examination requirements _____ dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 11/15/54 License 11/15/54 - 4:07 PM Marriage 11/20/54 - 2:00 PM Place of Marriage Fairport, N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
 Official Lawrence P. Delp Profession Clergyman Witness James H. Berrant - Rochester, N.Y.
 12 Perryburg, Penna. Witness Donald J. Fisher - 700 Ringgold, Penna.
 Period for solemnization of marriage begins at 4:07 P.M. on the 16 day of Nov. 1954 and ends the 14 day of Jan. 1955.

Reported to State Def + Health 12/1/54
 Reported to State Def + Health 12/16/54
 Reported to State Def + Health 12/16/54

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 68
 Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Pasquale Ciavarrò</u>	Color <u>white</u>	Name <u>Ida Bellonia</u>	Color <u>white</u>
Residence <u>429 West Ave - E. Rochester, N.Y.</u>	Age <u>58 - 8/31/1896</u>	Residence <u>22 June St. - Rochester, N.Y.</u>	Age <u>58 - 3/11/1896</u>
Occupation <u>Steel worker - Car Shop</u>	No. of marriage <u>2nd</u>	Occupation <u>Tailor - Clothing</u>	No. of marriage <u>2nd</u>
Birthplace <u>Santa Croce, Italy</u>	Former wife or wives living or dead <u>living</u>	Birthplace <u>Pedra Persia, Italy</u>	Former husband or husbands living or dead <u>dead</u>
Father <u>Theodore Ciavarrò</u>	Divorced <u>Yes</u>	Father <u>Philip Puzzo</u>	Divorced
Birthplace <u>Italy</u>	" when <u>Jan. 28, 1943</u>	Birthplace <u>Italy</u>	" when
Mother <u>Anna Lacurro</u>	" where <u>Monaco</u>	Mother <u>Philippa Cannata</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y. Date 11/12/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Rochester Health Bureau 260 Crittenden Blvd. Rochester, N.Y. Date 11/10/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Jerome H. Amante 239 W. 4th St. Rochester, N.Y. Date 11/9/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>George W. McLaughlin 16 W. Goodman St. Rochester, N.Y. Date 11/8/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>11/18/54</u> License <u>11/18/54-12:00 P.M.</u> Marriage <u>11/20/54 11:05 A.M.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Byron H. Brown</u> Profession <u>Justice of Peace</u>	(Name and address of official)	Official <u>Anthony Maciello</u> Profession <u>Justice of Peace</u>	(Name and address of official)
Period for solemnization of marriage begins at <u>12:00 P.M.</u> on the <u>19</u> day of <u>Nov.</u> 19 <u>54</u> and ends the <u>17</u> day of <u>Jan.</u> 19 <u>55</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>55</u>	

City Town of Perinton County Monroe STATE OF NEW YORK No. 69
 Town Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>George Ronald Chapman</u>	Color <u>white</u>	Name <u>Hazel Ann Mc Cleave</u>	Color <u>white</u>
Residence <u>23 High St - Fairport, N.Y.</u>	Age <u>19 - 1/9/35</u>	Residence <u>16 Fonesome St - Fairport, N.Y.</u>	Age <u>19 - 8/19/35</u>
Occupation <u>Apprentice on dress factory</u>	No. of marriage <u>1st</u>	Occupation <u>Office Clerk - factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Rutherford, Penna.</u>	Former wife or wives living or dead	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead
Father <u>Henry Jacob Chapman</u>	Divorced	Father <u>Fred Preston Mc Cleave</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Canada</u>	" when
Mother <u>Margaret May Parker</u>	" where	Mother <u>Margaret Emma Welch</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y. Date 11/3/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y. Date 11/3/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Krasi 84 S. Main St. Fairport, N.Y. Date 11/1/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>John Krasi 84 S. Main St. Fairport, N.Y. Date 11/1/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by <u>Henry Chapman</u> Relation <u>father</u> Date <u>11/17/54</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Margaret Chapman</u> Relation <u>mother</u> Date <u>11/17/54</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Automobile Driver's License</u> (Form)		Proof of age <u>Certified Copy of Birth record</u> (Form)	
Date: Affidavit <u>11/19/54</u> License <u>11/19/54-4:24 P.M.</u> Marriage <u>11/20/54-4:30 P.M.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Alvin C. Foster 14 W. Church St. Fairport, N.Y. Profession <u>Ordained Minister</u></u>	(Name and address of official)	Official <u>Velma Barnes 68 miles Ave. Fairport, N.Y. Profession <u>Wendell Barnes 68 miles Ave. Fairport, N.Y.</u></u>	(Name and address of official)
Period for solemnization of marriage begins at <u>4:24 P.M.</u> on the <u>20</u> day of <u>Nov.</u> 19 <u>54</u> and ends the <u>18</u> day of <u>Jan.</u> 19 <u>55</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>55</u>	

City Town of Perinton County Monroe STATE OF NEW YORK No. 70
 Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Thomas Kenneth Edwards</u>	Color <u>white</u>	Name <u>Gertrude Louise Miller</u>	Color <u>white</u>
Residence <u>Sampson Ave. LaBee, N.Y.</u>	Age <u>23 - 12/29/30</u>	Residence <u>45 E. Church St. - Fairport, N.Y.</u>	Age <u>26 - 9/10/28</u>
Occupation <u>Airman 1st class - U.S. Air Force</u>	No. of marriage <u>1st</u>	Occupation <u>Teller - Bank</u>	No. of marriage <u>1st</u>
Birthplace <u>Cambria, Pa.</u>	Former wife or wives living or dead	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead
Father <u>Donald Edwards Sr.</u>	Divorced	Father <u>Henry Miller</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Hermany</u>	" when
Mother <u>Eather Clair Pitt</u>	" where	Mother <u>Charlotte Christina Weischim</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y. Date 11/16/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y. Date 11/16/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>George A. Neau 11 West Church St. Fairport, N.Y. Date 11/12/54</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>George A. Neau 11 West Church St. Fairport, N.Y. Date 11/13/54</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Nov. 20 1954</u> License <u>Nov. 20 1954 11:49 A.M.</u> Marriage <u>Nov. 25 1954 7:30 P.M.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>Ronald G. Ruchfeld 41 1/2 W. 5th St. Fairport, N.Y. Profession <u>Arthur Chapman</u></u>	(Name and address of official)	Official <u>Christiana M. Miller 45 1/2 Church St. Fairport, N.Y. Profession <u>Harold S. Pills 57 South Ave. Fairport, N.Y.</u></u>	(Name and address of official)
Period for solemnization of marriage begins at <u>11:49 A.M.</u> on the <u>21</u> day of <u>November</u> 19 <u>54</u> and ends the <u>19</u> day of <u>January</u> 19 <u>55</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>54</u> and ends the _____ day of _____ 19 <u>55</u>	

Reported to State Dept of Health 12/1/54
 Mailed to State Dept of Health 12/16/54
 Reported to State Dept of Health 12/1/54
 Mailed to State Dept of Health 12/16/54
 Reported to State Dept of Health 12/1/54
 Mailed to State Dept of Health 12/16/54

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 71
 Clerk Charlotte Clapp

Reported to Bd. of State Health 12/1/54
 Reported to State Dept of Health 1/5/57
 Reported to State Dept of Health 1/5/57

GROOM

Name Henry Joseph Kohl Color white
 Residence 104 E. Fairport St. Fairport N.Y. Age 31 6/29/23
 Occupation Mach. Airt Kodak No. of marriage 2nd
 Birthplace Rochester N.Y. Former wife or wives living or dead living
 Father Raymond Edward Kohl Divorced yes
 Birthplace U.S. " when Aug 16 1954
 Mother Anna Van Dams " where Chateaufort, Cal.
 Birthplace U.S. " against whom Mary Kohl U.S.
 Laboratory Statement Monroe Co. Lab. 435 E. Henrietta Road Rochester 20 N.Y. Date 11/23/54
 Physician's Statement Dr. Leo Hoffmann E. Rochester N.Y. Date 11/20/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit Nov. 27 1954 License Nov. 27 1954 - 11:51 A.M. Marriage 12/18/54 - 11:30 A.M. Place of Marriage East Rochester, N.Y.
 Official Roy B. Murphy Profession Catholic Priest Witness Theodore W. Kohl - Fairport, N.Y.
 Period for solemnization of marriage begins at 11:30 A.M. on the 28 day of Nov. 1954 and ends the 26 day of Jan. 1955

BRIDE

Name Mary Agatha Bayko Color white
 Residence 108 Madison St. Rochester N.Y. Age 31 2/5/23
 Occupation Machine Operator Factory No. of marriage 1st
 Birthplace Fitchfield Mass. Former husband or husbands living or dead living
 Father Victor James Bayko Divorced _____
 Birthplace Poland " when _____
 Mother Joséphine Hedwige Machis " where _____
 Birthplace U.S. " against whom _____
 Laboratory Statement Monroe Co. Lab. 435 E. Henrietta Road Rochester 20 N.Y. Date 11/23/54
 Physician's Statement Dr. Leo Hoffmann E. Rochester N.Y. Date 11/20/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit Nov. 27 1954 License Nov. 27 1954 - 11:51 A.M. Marriage 12/18/54 - 11:30 A.M. Place of Marriage East Rochester, N.Y.
 Official Roy B. Murphy Profession Catholic Priest Witness Theodore W. Kohl - Fairport, N.Y.
 Period for solemnization of marriage begins at 11:30 A.M. on the 28 day of Nov. 1954 and ends the 26 day of Jan. 1955

City Town of Perinton County Monroe STATE OF NEW YORK No. 72
 Clerk Charlotte Clapp

Reported to Bd. of State Health 12/1/54
 Reported to State Dept of Health 1/5/55

GROOM

Name Howard William Lutz Color white
 Residence 223 State St. Rochester N.Y. Age 31 5/3/23
 Occupation Machine Operator Photograph No. of marriage 2nd
 Birthplace U.S. Former wife or wives living or dead living
 Father Edmund George Lutz Divorced yes
 Birthplace U.S. " when Dec 28 1951
 Mother Frances Cordelia Jarvis " where U.S.
 Birthplace U.S. " against whom Howard W. Lutz
 Laboratory Statement Rochester Health Bureau Date 11/1/54
 Physician's Statement George H. Gage 182 Canella Ave Rochester N.Y. Date 10/28/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit Nov. 29 1954 License Nov. 29 1954 4:23 P.M. Marriage Dec 4 1954 1:30 P.M. Place of Marriage Rochester N.Y.
 Official John E. Butryn Profession Clergyman Witness Grace Dangler Rochester N.Y.
 Period for solemnization of marriage begins at 4:23 P.M. on the 30 day of November 1954 and ends the 28 day of January 1955

BRIDE

Name Evelyn Ella Lutz Color white
 Residence 157 Canella Ave Rochester N.Y. Age 31 3/1/23
 Occupation Assembler Photograph No. of marriage 2nd
 Birthplace Rochester N.Y. Former husband or husbands living or dead living
 Father Amos Canella Schart Divorced yes
 Birthplace U.S. " when Dec 28 1951
 Mother Mary Louise Hager " where Monroe Co. N.Y.
 Birthplace U.S. " against whom Howard W. Lutz
 Laboratory Statement Rochester Health Bureau Date 11/1/54
 Physician's Statement George H. Gage 182 Canella Ave Rochester N.Y. Date 10/28/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit Nov. 29 1954 License Nov. 29 1954 4:23 P.M. Marriage Dec 4 1954 1:30 P.M. Place of Marriage Rochester N.Y.
 Official John E. Butryn Profession Clergyman Witness Grace Dangler Rochester N.Y.
 Period for solemnization of marriage begins at 4:23 P.M. on the 30 day of November 1954 and ends the 28 day of January 1955

City Town of Perinton County Monroe STATE OF NEW YORK No. 73
 Clerk Charlotte Clapp

Reported to Bd. of State Health 12/1/54
 Reported to State Dept of Health 12/1/54

GROOM

Name Robert Walter Roy Stratmann Color white
 Residence 1063 1/2 St Paul St. Rochester N.Y. Age 21 June 9 1933
 Occupation Soldier U.S. Army No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead _____
 Father Alfred Stratmann Divorced _____
 Birthplace Germany " when _____
 Mother Margaret Burtner " where _____
 Birthplace Germany " against whom _____
 Laboratory Statement Rochester Health Bureau Date 11/30/54
 Physician's Statement Tully Robinson M.D. 450 Arnett Blvd Rochester N.Y. Date 11/29/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit Nov. 30 1954 License Nov 30 1954 2:50 P.M. Marriage Dec 1 1954 8:30 P.M. Place of Marriage Rochester N.Y.
 Official Gerald T. Connor Profession Catholic Priest Witness Robert Stratmann 217 Remington St. Rochester N.Y.
 Period for solemnization of marriage begins at 2:50 P.M. on the 1st day of December 1954 and ends the 29 day of January 1955

BRIDE

Name Colleen Ann Moore Color white
 Residence 324 F. Hunt St. Rochester N.Y. Age 18 Aug 11 1936
 Occupation at home No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead _____
 Father Thomas S. Moore Divorced _____
 Birthplace U.S. " when _____
 Mother Alice Angela Litter " where _____
 Birthplace U.S. " against whom _____
 Laboratory Statement Rochester Health Bureau Date 11/30/54
 Physician's Statement Tully Robinson M.D. 450 Arnett Blvd Rochester N.Y. Date 11/29/54
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit Nov. 30 1954 License Nov 30 1954 2:50 P.M. Marriage Dec 1 1954 8:30 P.M. Place of Marriage Rochester N.Y.
 Official Gerald T. Connor Profession Catholic Priest Witness Robert Stratmann 217 Remington St. Rochester N.Y.
 Period for solemnization of marriage begins at 2:50 P.M. on the 1st day of December 1954 and ends the 29 day of January 1955

RECORD OF MARRIAGES

74

City Town of Perinton County Monroe STATE OF NEW YORK No. 74

Clerk Charlotte Clapp

GROOM

Name David Earl Duwell Color White
 Residence Tow Path Fairport NY Age 32 9/30/22
 Occupation Banker No. of marriage 1st
 Birthplace Manus NY Former wife or wives living or dead
 Father Boyd Duwell Divorced
 Birthplace U.S. " when
 Mother Elorence Sherman " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY Date 11/26/54 (Test completed)
 Physician's Statement John Kraai 84 S. Main St Fairport Date 11/23/54 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

BRIDE

Name Marion Marion Koester Color White
 Residence Tow Path Fairport NY Age 18 11/18/36
 Occupation at home No. of marriage 1st
 Birthplace Brighton NY Former husband or husbands living or dead
 Father Fredrick Louis Koester Divorced
 Birthplace U.S. " when
 Mother Emma Oldenburg " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY Date 11/26/54 (Test completed)
 Physician's Statement John Kraai 84 S. Main St Fairport Date 11/23/54 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit Dec. 1 1954 License 12/1/54 1:04 P.M. Marriage Dec. 2 1954 10 P.M. Place of Marriage Fairport NY
 Official Joe Cledemning Profession Minister Witness Edward S. Wells Fairport NY
 Period for solemnization of marriage begins at 1:04 P.M. on the 2nd day of December 1954 and ends the 30 day of January 1955

City Town of Perinton County Monroe STATE OF NEW YORK No. 75

Clerk Charlotte Clapp

GROOM

Name David Edward Earls Color White
 Residence 23 Brighton Ave. Pittsford NY Age 25 6/9/29
 Occupation Student College No. of marriage 1st
 Birthplace Pittsford NY Former wife or wives living or dead
 Father Alfred William Earls Divorced
 Birthplace U.S. " when
 Mother Loretta Lillian Short " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Rd Rochester NY Date 11/19/54 (Test completed)
 Physician's Statement D. A. R. Hurley 601 Main St Rochester NY Date 11/17/54 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

BRIDE

Name Angie Ann Profergi Color White
 Residence 246 East Ave. E. Rochester NY Age 21 1/1/33
 Occupation Secretary Tool and die No. of marriage 1st
 Birthplace E. Rochester NY Former husband or husbands living or dead
 Father Ramiro Genero Profergi Divorced
 Birthplace Italy " when
 Mother Margaret Regina Berlin " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY Date 11/19/54 (Test completed)
 Physician's Statement D. A. R. Hurley 601 Main St Rochester NY Date 11/17/54 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit Dec. 6 1954 License 12/6/54 - 4:16 P.M. Marriage 12/19/54 - 11:00 A.M. Place of Marriage East Rochester NY
 Official Ray B. Murphy Profession Catholic Priest Witness Alfred W. Earls, 302 Princeton Rd. Westfield NY
 Period for solemnization of marriage begins at 4:16 P.M. on the 7 day of Dec 1954 and ends the 5 day of Feb 1955

City Town of Perinton County Monroe STATE OF NEW YORK No. 76

Clerk Charlotte Clapp

GROOM

Name Warren Howard Schlesing Color White
 Residence Main St. Walworth NY Age 21 Feb 10 1933
 Occupation Massin helper construction No. of marriage 1st
 Birthplace Brighton NY Former wife or wives living or dead
 Father Len Schlesing Divorced
 Birthplace U.S. " when
 Mother Martha Vanta " where
 Birthplace U.S. " against whom

Laboratory Statement Division of Laboratories & Research Albany NY Date 11/18/54 (Test completed)
 Physician's Statement W H F Newman M.D. Walworth NY Date 11/16/54 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

BRIDE

Name Pauline Edwina Rimbold Color White
 Residence #1 Cx Bow Fairport NY Age 17 May 1 1937
 Occupation at home No. of marriage 1st
 Birthplace Panfield NY Former husband or husbands living or dead
 Father Richard Leo Rimbold Divorced
 Birthplace U.S. " when
 Mother Irane Mary Rayms " where
 Birthplace U.S. " against whom

Laboratory Statement Division of Laboratories and Research Albany NY Date 11/18/54 (Test completed)
 Physician's Statement W H F Newman M.D. Walworth NY Date 11/16/54 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation Father Date 12/8/54
 Consent by _____ Relation mother Date 12/8/54

Proof of age _____ (Form)
 Date: Affidavit Dec 8 1954 License Dec 8 1954 7:20 P.M. Marriage Dec 11 1954 1 P.M. Place of Marriage Fairport NY
 Official Alvin C. Foster Profession Ordained Minister Witness Mrs Carl R. St Andrews 309 W. Elm St E. Rochester NY
 Period for solemnization of marriage begins at 7:20 P.M. on the 9 day of December 1954 and ends the 7 day of February 1955

Referred to Pd to State Dept of Health 1/3/55
 Referred to State Dept of Health 1/5/55
 Referred to State Dept of Health 1/5/55
 Referred to State Dept of Health 1/5/55
 Referred to State Dept of Health 1/5/55

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 77
Clerk Charlotte Clapp

GROOM

Name Floyd Addison Rinebold Jr. Color white
 Residence 45 Vile Pl. A. Rochester, N.Y. Age 20 - 6/14/34
 Occupation Book weaver - Restaurant No. of marriage 1st
 Birthplace Brighton, N.Y. Former wife or wives living or dead.
 Father Floyd Addison Rinebold Sr. Divorced
 Birthplace U.S. " when
 Mother Gertrude May Keens " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 12/21/54 (Test completed)
 Physician's Statement John Kraai - 84 S. Main St. Fairport, N.Y. Date 12/18/54 (Specimen taken)
 Examination requirements were met dispensed with by judge or justice
 Consent by Gertrude Rinebold Relation mother Date 12/21/54
 Consent by _____ Relation _____ Date _____

Proof of age Certification of Birth (Form)
 Date: Affidavit 12/21/54 License 12/21/54 - 4:58 P.M. Marriage 12/23/54 - 8:27 P.M. Place of Marriage Fairport, N.Y.
 Official Robert B. Mann Profession Protstant Clergyman Witness Gertrude Rinebold 366 W. Commercial St. 2nd Fl. Clifford St. - Fairport, N.Y.
 Period for solemnization of marriage begins at 4:54 P.M. on the 22 day of Dec 1954 and ends the 20 day of January 1955

BRIDE

Name Dorothy Marie Merrill Color white
 Residence 327 Canterbury Rd. Rochester, N.Y. Age 20 - 1/16/34
 Occupation Secretary - Food No. of marriage 1st
 Birthplace Boston, N.Y. Former husband or husbands living or dead.
 Father Phonon Lesson Merrill Divorced
 Birthplace U.S. " when
 Mother Louise Gertrude Harris " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 12/21/54 (Test completed)
 Physician's Statement John Kraai - 84 S. Main St. Fairport, N.Y. Date 12/18/54 (Specimen taken)
 Examination requirements were met dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age Certification of Birth (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1954 and ends the _____ day of _____ 1955

Reported - Pd to State Dept of Health 1/3/55
mailed to State Dept of Health 1/5/55

City Town of Perinton County Monroe STATE OF NEW YORK No. 78
Clerk Charlotte Clapp

GROOM

Name Lawrence Bruce Holmes Color white
 Residence 37 West St. - Fairport, N.Y. Age 22 - 4/14/32
 Occupation Naval Cadet - U.S.N.R. No. of marriage 1st
 Birthplace Fairport, N.Y. Former wife or wives living or dead.
 Father Lynne Carroll Holmes Divorced
 Birthplace U.S. " when
 Mother Caroline Elizabeth Rosegarten " where
 Birthplace U.S. " against whom

Laboratory Statement Naval Air Station Dispensary Laboratory Date 12/7/54 (Test completed)
 Physician's Statement Wilbur S. Buehler - 20 W. Church St. Fairport, N.Y. Date 12/7/54 (Specimen taken)
 Examination requirements were met dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit 12/27/54 License 12/27/54 - 1:31 P.M. Marriage Jan 22 1955 4 P.M. Place of Marriage Fairport, N.Y.
 Official Alvin C. Foster Profession Ordained Minister Witness Sylvia Dietrich 151 Howell Road Fairport, N.Y.
 Period for solemnization of marriage begins at 1:31 P.M. on the 28 day of December 1954 and ends the 26 day of February 1955

BRIDE

Name Joyce Ina Dietrich Color white
 Residence 151 Howell Rd. - Fairport, N.Y. Age 21 - 9/6/33
 Occupation Student - Teacher's College No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead.
 Father Norman Alexander Dietrich Divorced
 Birthplace U.S. " when
 Mother Florence Marion Boutton " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 12/21/54 (Test completed)
 Physician's Statement Wilbur S. Buehler - 20 W. Church St. - Fairport, N.Y. Date 12/17/54 (Specimen taken)
 Examination requirements were met dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1954 and ends the _____ day of _____ 1955

Reported - Pd to State Dept of Health 1/3/55
mailed to State Dept of Health 2/5/55

City Town of Perinton County Monroe STATE OF NEW YORK No. 1
Clerk Charlotte Clapp

GROOM

Name Robert Lee Lucas Color white
 Residence 41 Parnell Road Fairport, N.Y. Age 24 7/25/30
 Occupation Carpenter Contractor No. of marriage 1st
 Birthplace Walworth, N.Y. Former wife or wives living or dead.
 Father Thomas Cecil Lucas Divorced
 Birthplace U.S. " when
 Mother Flores Bill " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 12/30/54 (Test completed)
 Physician's Statement John Kraai - 84 S. Main St. Fairport, N.Y. Date 12/28/54 (Specimen taken)
 Examination requirements _____ dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit Jan 3 1955 License Jan 3 1955 4:16 Marriage Jan 22 1955 2 P.M. Place of Marriage Fairport, N.Y.
 Official Robert B. Mann Profession Clergyman Witness John Kraai 84 S. Main St. Fairport, N.Y.
 Period for solemnization of marriage begins at 11:16 P.M. on the 14th day of January 1955 and ends the 2nd day of March 1955

BRIDE

Name Helen Elizabeth Young Color white
 Residence 115 West Ave. Fairport, N.Y. Age 24 8/31/30
 Occupation Secretary Research No. of marriage 1st
 Birthplace Fairport, N.Y. Former husband or husbands living or dead.
 Father George Dean Young Divorced
 Birthplace U.S. " when
 Mother Catherine Edna Sweetfall " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. 435 E. Henrietta Rd. Date 12/30/54 (Test completed)
 Physician's Statement John Kraai - 84 S. Main St. Fairport, N.Y. Date 12/28/54 (Specimen taken)
 Examination requirements _____ dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1955 and ends the _____ day of _____ 1955

Reported - Pd to State Dept of Health 2/1/55
mailed to State Dept of Health 2/5/55

RECORD OF MARRIAGES

City Town of Perinton County Monroe STATE OF NEW YORK No. 2
 Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Jessie Tallow Mead</u>	Color <u>White</u>	Name <u>Martha Ellen Bryant</u>	Color <u>White</u>
Residence <u>138 S. Main St Fairport NY</u>	Age <u>23</u> 9/20/31	Residence <u>138 S. Main St Fairport NY</u>	Age <u>17</u> 5/9/37
Occupation <u>Machinist Factory</u>	No. of marriage <u>1st</u>	Occupation <u>At home</u>	No. of marriage <u>1st</u>
Birthplace <u>Perissa Ill.</u>	Former wife or wives living or dead.	Birthplace <u>Bohache Okla.</u>	Former husband or husbands living or dead.
Father <u>Lamborn Byron Mead</u>	Divorced	Father <u>Charles Harold Bryant</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Mrs Katherine Tallow</u>	" where	Mother <u>Florence Margaret Little</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>1/4/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>1/4/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraus MD 84 S. Main St Fairport NY</u> Date <u>1/2/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraus MD 84 S. Main St Fairport NY</u> Date <u>1/2/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by <u>Charlie Bryant</u> Relation <u>Father</u> Date <u>12/4/54</u>	
Consent by _____ Relation _____ Date _____		Consent by <u>Florence Bryant</u> Relation <u>Mother</u> Date <u>12/4/54</u>	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Jan 7 1955</u> License <u>Jan 7 1955</u> Marriage <u>Jan 8 1955 2 p.</u> Place of Marriage <u>Fairport NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Jan 7 1955</u> License <u>Jan 7 1955</u> Marriage <u>Jan 8 1955 2 p.</u> Place of Marriage <u>Fairport NY</u>	(Month) (Day) (Year) (Hour)
Official <u>Robert B. Marr</u> Profession <u>Professional assistant clergyman</u>		Official <u>Robert B. Marr</u> Profession <u>Professional assistant clergyman</u>	
Witness <u>Frank A. Wickham</u>		Witness <u>Frank A. Wickham</u>	
Period for solemnization of marriage begins at <u>10:12 A.M.</u> on the <u>8</u> day of <u>January</u> 1955 and ends the <u>6</u> day of <u>March</u> 1955		Period for solemnization of marriage begins at <u>10:12 A.M.</u> on the <u>8</u> day of <u>January</u> 1955 and ends the <u>6</u> day of <u>March</u> 1955	

Reported to State Dept of Health 2/1/55
 mailed to State Dept of Health 2/5/55

City Town of Perinton County Monroe STATE OF NEW YORK No. 3
 Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Richard George Kier</u>	Color <u>White</u>	Name <u>Nancy Marie Morse</u>	Color <u>White</u>
Residence <u>125 E. Main Ave. E. Rochester NY</u>	Age <u>22</u> 4/11/32	Residence <u>140 E. Commercial St. E. Rochester NY</u>	Age <u>18</u> Aug 27 1936
Occupation <u>Lab. Factory</u>	No. of marriage <u>1st</u>	Occupation <u>Hair dresser Beauty parlor</u>	No. of marriage <u>1st</u>
Birthplace <u>Renfield N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>E. Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>George John Kier</u>	Divorced	Father <u>James Inland Morse</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Margaret Lucille Cook</u>	" where	Mother <u>Rose Chantrea</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>Jan 21 1955</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>Jan 21 1955</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Jerome H. Amaranant 239 West Ave E. Rochester NY</u> Date <u>Jan 18 1955</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Jerome H. Amaranant 239 West Ave E. Rochester NY</u> Date <u>Jan 18 1955</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Jan 25 1955</u> License <u>Jan 25 1955</u> Marriage <u>Jan 28 1955 7 p.</u> Place of Marriage <u>East Rochester NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Jan 25 1955</u> License <u>Jan 25 1955</u> Marriage <u>Jan 28 1955 7 p.</u> Place of Marriage <u>East Rochester NY</u>	(Month) (Day) (Year) (Hour)
Official <u>Wilbur Carl Albright</u> Profession <u>Clergyman</u>		Official <u>Wilbur Carl Albright</u> Profession <u>Clergyman</u>	
Witness <u>Harold Albert Kier</u>		Witness <u>Harold Albert Kier</u>	
Period for solemnization of marriage begins at <u>3:06 p.</u> M. on the <u>26</u> day of <u>January</u> 1955 and ends the <u>24</u> day of <u>March</u> 1955		Period for solemnization of marriage begins at <u>3:06 p.</u> M. on the <u>26</u> day of <u>January</u> 1955 and ends the <u>24</u> day of <u>March</u> 1955	

Reported to State Dept of Health 2/1/55
 mailed to State Dept of Health 2/5/55

City Town of Perinton County Monroe STATE OF NEW YORK No. 4
 Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Louis Casini</u>	Color <u>White</u>	Name <u>Cosimo Matilda Wegman</u>	Color <u>White</u>
Residence <u>55 Frank St Fairport NY</u>	Age <u>24</u> 9/21/30	Residence <u>Taylors Road Clifton Springs NY</u>	Age <u>20</u> Aug 14 1934
Occupation <u>Fireman Factory</u>	No. of marriage <u>1st</u>	Occupation <u>Student School</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport NY</u>	Former wife or wives living or dead.	Birthplace <u>Rochester NY</u>	Former husband or husbands living or dead.
Father <u>Camillo Casini</u>	Divorced	Father <u>Walter George Wegman</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Fiorilla Mammuzzio</u>	" where	Mother <u>Josephine Elizabeth Lettau</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>12/30/54</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>12/30/54</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Wilbur S. Buhaltz 20 W. Church St Fairport NY</u> Date <u>12/27/54</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Wilbur S. Buhaltz 20 W. Church St Fairport NY</u> Date <u>12/27/54</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Jan 25 1955</u> License <u>1/25/55 3:25 PM</u> Marriage <u>2/19/55 10:30 AM</u> Place of Marriage <u>Shortsville NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Jan 25 1955</u> License <u>1/25/55 3:25 PM</u> Marriage <u>2/19/55 10:30 AM</u> Place of Marriage <u>Shortsville NY</u>	(Month) (Day) (Year) (Hour)
Official <u>John P. Napier</u> Profession <u>P.C. Clergyman</u>		Official <u>John P. Napier</u> Profession <u>P.C. Clergyman</u>	
Witness <u>Anthony R. Bartolotta</u>		Witness <u>Anthony R. Bartolotta</u>	
Period for solemnization of marriage begins at <u>3:25 P.M.</u> on the <u>26</u> day of <u>January</u> 1955 and ends the <u>24</u> day of <u>March</u> 1955		Period for solemnization of marriage begins at <u>3:25 P.M.</u> on the <u>26</u> day of <u>January</u> 1955 and ends the <u>24</u> day of <u>March</u> 1955	

Reported to State Dept of Health 2/1/55
 mailed to State Dept of Health 4/5/55

RECORD OF MARRIAGES

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City Town of Perinton County Monroe STATE OF NEW YORK No. 5
Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Richard Stewart Angelo</u>	Color <u>White</u>	Name <u>Eleanor Sterling</u>	Color <u>White</u>
Residence <u>10 Erie St. Macedon N.Y.</u>	Age <u>19</u> <u>10/17/35</u>	Residence <u>175 N. Clinton Ave Rochester N.Y.</u>	Age <u>18</u> <u>July 29 1936</u>
Occupation <u>Labor Manufacturing</u>	No. of marriage <u>1st</u>	Occupation <u>Stenographer Clothing</u>	No. of marriage <u>1st</u>
Birthplace <u>Macedon N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Camardaigna N.Y.</u>	Former husband or husbands living or dead
Father <u>Anthony Albert Angelo</u>	Divorced	Father <u>Wilson Sterling</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Sarah Marie Stewart</u>	" where	Mother <u>Catherine Sages</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab.</u>	Date <u>1/24/55</u>	Laboratory Statement <u>Rochester Health Bureau Lab.</u>	Date <u>1/24/55</u>
Physician's Statement <u>Dr. Stanley H. Galenbach Rochester N.Y.</u>	Date <u>1/22/55</u>	Physician's Statement <u>Dr. Stanley H. Galenbach Rochester N.Y.</u>	Date <u>1/22/55</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by <u>Anthony Angelo</u>	Relation <u>Father</u>	Consent by	Relation
Consent by <u>Mrs. Anthony Angelo</u>	Relation <u>Mother</u>	Consent by	Relation
Proof of age <u>Certification of Birth</u>	(Form)	Proof of age <u>Certification of Birth</u>	(Form)
Date: Affidavit <u>Jan 27 1955</u>	License <u>Jan 27 1955</u>	Date: Affidavit <u>Jan 28 1955</u>	License <u>Jan 28 1955</u>
Official <u>Robert B. Marx</u>	Profession <u>Probationary Clergyman</u>	Official <u>Mrs. Wilson Sterling</u>	Profession <u>Wife</u>
Witness <u>Paul Anthony Angelo</u>	Witness <u>Paul Anthony Angelo</u>	Witness <u>Paul Anthony Angelo</u>	Witness <u>Paul Anthony Angelo</u>
Period for solemnization of marriage begins at <u>1:07 P.M.</u>	on the <u>28</u> day of <u>January</u>	Period for solemnization of marriage begins at <u>1:07 P.M.</u>	on the <u>28</u> day of <u>January</u>

mailed to State Dept + Health 2/1/55

City Town of Perinton County Monroe STATE OF NEW YORK No. 6
Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>William Francis Ebner</u>	Color <u>White</u>	Name <u>Shirley Marie Woodward</u>	Color <u>White</u>
Residence <u>142 Paris Ave, Fairport, N.Y.</u>	Age <u>21</u> <u>2/20/33</u>	Residence <u>Walworth - Mason Rd - Walworth, N.Y.</u>	Age <u>21</u> <u>7/22/33</u>
Occupation <u>Labor - Can factory</u>	No. of marriage <u>1st</u>	Occupation <u>Walworth - N.Y.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Walworth, N.Y.</u>	Former husband or husbands living or dead
Father <u>Francis A. Ebner</u>	Divorced	Father <u>Harold Woodward</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Margaret Jane Ott</u>	" where	Mother <u>Viola Marie Pembroke</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Division of Laboratories + Research - Albany, N.Y.</u>	Date <u>1/27/55</u>	Laboratory Statement <u>Division of Laboratories + Research - Albany, N.Y.</u>	Date <u>1/27/55</u>
Physician's Statement <u>W.H.F. Newman - Walworth, N.Y.</u>	Date <u>1/25/55</u>	Physician's Statement <u>W.H.F. Newman, Walworth, N.Y.</u>	Date <u>1/25/55</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by	Relation	Consent by	Relation
Consent by	Relation	Consent by	Relation
Proof of age	(Form)	Proof of age	(Form)
Date: Affidavit <u>Feb. 5, 1955</u>	License <u>2/5/55-11:04 AM</u>	Date: Affidavit <u>2/19/55-2:00 P.</u>	License <u>2/19/55-2:00 P.</u>
Official <u>George H. Munger</u>	Profession <u>Minister</u>	Official <u>Margaret A. Ebner</u>	Profession <u>Wife</u>
Witness <u>Harry S. Ebner</u>	Witness <u>Harry S. Ebner</u>	Witness <u>Harry S. Ebner</u>	Witness <u>Harry S. Ebner</u>
Period for solemnization of marriage begins at <u>11:04 A.M.</u>	on the <u>6</u> day of <u>Feb.</u>	Period for solemnization of marriage begins at <u>11:04 A.M.</u>	on the <u>6</u> day of <u>April</u>

mailed to State Dept + Health 3/1/55

City Town of Perinton County Monroe STATE OF NEW YORK No. 7
Town Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Ronald Lewis Cook</u>	Color <u>White</u>	Name <u>Rosemary De Jaeger</u>	Color <u>White</u>
Residence <u>1005 E. Whitney Rd. Fairport N.Y.</u>	Age <u>18</u> <u>1/15/37</u>	Residence <u>RD #2, Palmyra, N.Y.</u>	Age <u>18</u> <u>2/25/36</u>
Occupation <u>Airman 3-C - U.S. Air Force</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Camandaigna, N.Y.</u>	Former husband or husbands living or dead
Father <u>Ronald Lewis Cook</u>	Divorced	Father <u>Adrian De Jaeger</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Belgium</u>	" when
Mother <u>Violet May Wilhelm</u>	" where	Mother <u>Selma Margaret Reubens</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Belgium</u>	" against whom
Laboratory Statement <u>Health U.S.A.F. Dispensary - Perinton, N.Y.</u>	Date <u>2/8/55</u>	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u>	Date <u>2/11/55</u>
Physician's Statement <u>Robert M. Weiss</u>	Date <u>2/8/55</u>	Physician's Statement <u>Jerome H. Amaraniti - 239 West Ave. Rochester, N.Y.</u>	Date <u>2/9/55</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by <u>Violet May Ellsworth</u>	Relation <u>Mother</u>	Consent by	Relation
Consent by <u>(Father dead)</u>	Relation	Consent by	Relation
Proof of age <u>Certification of Birth</u>	(Form)	Proof of age <u>Certification of Birth</u>	(Form)
Date: Affidavit <u>2/19/55</u>	License <u>2/19/55-2:56 PM</u>	Date: Affidavit	License
Official	Profession	Official	Profession
Witness	Witness	Witness	Witness
Period for solemnization of marriage begins at <u>2:56 P.M.</u>	on the <u>20</u> day of <u>Feb.</u>	Period for solemnization of marriage begins at	on the <u>20</u> day of <u>April</u>

Reported to State Dept + Health 3/1/55

RECORD OF MARRIAGES

Town Perinton County Monroe STATE OF NEW YORK No. 8
Clerk Charlotte Clapp

GROOM

Name John Joseph Andrews Color white
 Residence 284 Baden St. Rochester N.Y. Age 22 June 9 1932
 Occupation Clerk Gas service No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father John Alexander Andrews Divorced
 Birthplace U.S. " when
 Mother Elizabeth Gunk " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 3/1/55
 Physician's Statement Irish Jacobson M.D. 19 E. Church St. Fairport N.Y. Date 2/26/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

BRIDE

Name Jane Fern Cramer Color white
 Residence 603 W. Elm St. Rochester N.Y. Age 21 Oct 27 1933
 Occupation Machine Operator Banking No. of marriage 1st
 Birthplace Fairport N.Y. Former husband or husbands living or dead
 Father John Cramer Divorced
 Birthplace U.S. " when
 Mother Mary Mann " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 3/1/55
 Physician's Statement Irish Jacobson M.D. 19 E. Church St. Fairport N.Y. Date 2/26/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

Date: Affidavit Mar. 2 1955 License 3/2/55 8:14 P.M. Marriage Mar. 5 1955 11 A.M. Place of Marriage East Rochester N.Y.
 Official Ray B. Murphy Profession Catholic priest Witness George H. Cantin Jr. 179 Allenhill St. Rochester N.Y.
 Period for solemnization of marriage begins at 5:14 P.M. on the 3rd day of March 1955 and ends the 1st day of May 1955

City Perinton County Monroe STATE OF NEW YORK No. 9
Clerk Charlotte Clapp

GROOM

Name William Robertson Kettler Color white
 Residence 137 W. Spruce St. E. Rochester N.Y. Age 51 9/27/03
 Occupation Car man - Car shop No. of marriage 2nd
 Birthplace Locke Haven, Penna. Former wife or wives living or dead dead
 Father Harry Martin Kettler Divorced
 Birthplace U.S. " when
 Mother Jennie Rose Trench " where
 Birthplace England " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 4/1/55
 Physician's Statement John Kraai - 84 S. Main St. Fairport, N.Y. Date 3/29/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

BRIDE

Name Marion Ann Morse Color white
 Residence 68 East Avenue, Fairport, N.Y. Age 46 - 10/18/08
 Occupation Care of children - private home No. of marriage 2nd
 Birthplace Denver, N.Y. Former husband or husbands living or dead living
 Father Henry S. Morse Divorced yes
 Birthplace U.S. " when 2/19/55
 Mother Martha May Livermore " where Washoe Co, Nevada
 Birthplace U.S. " against whom Arthur C. Morse

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 4/1/55
 Physician's Statement John Kraai - 84 S. Main St. - Fairport, N.Y. Date 3/29/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

Date: Affidavit Apr. 7, 1955 License 4/7/55 - 4:44 P.M. Marriage 4/14/55 - 5:30 P.M. Place of Marriage East Rochester, N.Y.
 Official William C. Ehrlich Profession Clergyman Witness Harold M. Converse - Fairport, N.Y.
 Period for solemnization of marriage begins at 2:44 P.M. on the 7 day of April 1955 and ends the 6 day of June 1955

City Perinton County Monroe STATE OF NEW YORK No. 10
Clerk Charlotte Clapp

GROOM

Name Robert Maximilian Whalen Color white
 Residence 1351 Shoecraft Rd. Webster, N.Y. Age 20 7/20/34
 Occupation Warehouse - Packing Co. No. of marriage 1st
 Birthplace Brooksville, N.Y. Former wife or wives living or dead
 Father Earl James Whalen, Sr. Divorced
 Birthplace U.S. " when
 Mother Edna Caroline Kastner " where
 Birthplace U.S. " against whom

Laboratory Statement Rochester Health Bureau Date 4/4/55
 Physician's Statement Paul A. Ross - 480 Winton Rd. W. Rochester, N.Y. Date 4/1/55
 Examination requirements were not dispensed with by judge or justice
 Consent by Earl J. Whalen Relation father Date 4/9/55
 Consent by Edna C. Whalen Relation mother Date 4/9/55

Proof of age Certification of Birth (Form)

BRIDE

Name Carolyn Yvonne Hudson Color white
 Residence 779 Hudson Ck. Rd. Fairport, N.Y. Age 16 - 6/10/38
 Occupation at home No. of marriage 1st
 Birthplace Fairport, N.Y. Former husband or husbands living or dead
 Father Walter Joseph Hudson Divorced
 Birthplace U.S. " when
 Mother Marjorie Lorraine Knight " where
 Birthplace U.S. " against whom

Laboratory Statement Rochester Health Bureau Date 4/4/55
 Physician's Statement Paul A. Ross - 480 Winton Rd. W. - Roch. 10, N.Y. Date 4/1/55
 Examination requirements were not dispensed with by judge or justice
 Consent by Walter Joseph Hudson Relation father Date 4/9/55
 Consent by Marjorie Hudson Relation mother Date 4/9/55

Proof of age Original or certified copy of birth record (Form)

Date: Affidavit 4/9/55 License 4/9/55 - 10:27 A.M. Marriage 4/15/55 - 5:02 P.M. Place of Marriage Webster, N.Y.
 Official Franklin K. Blank Profession Clergyman Witness Harold Whalen - 779 Grand Ave. - Rochester N.Y.
 Period for solemnization of marriage begins at 9:04 A.M. on the 10 day of April 1955 and ends the 8 day of June 1955

Reported to State Dept. Health 4/11/55
 Reported to State Dept. Health 5/15/55
 Reported to State Dept. Health 5/15/55
 Reported to State Dept. Health 5/15/55

RECORD OF MARRIAGES

Reported to State Dept of Health 5/15/55

City Perinton County Monroe STATE OF NEW YORK No. 11
Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Alfred Giulio Basile</u>	Color <u>White</u>	<u>Clementina Del Vecchio</u>	Color <u>White</u>
Residence <u>10 Frank St. - Fairport, N.Y.</u>	Age <u>22 - 5/17/32</u>	<u>169 Warner St. - Rochester, N.Y.</u>	Age <u>22 - 3/13/32</u>
Occupation <u>Shipping - Factory</u>	No. of marriage <u>1st</u>	<u>Assembler - Factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport, N.Y.</u>	Former wife or wives living or dead.	<u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Giulio Basile</u>	Divorced	<u>Crescenzo Del Vecchio</u>	Divorced
Birthplace <u>Italy</u>	" when	<u>Italy</u>	" when
Mother <u>Anna Della Porta</u>	" where	<u>Anna De Lucia</u>	" where
Birthplace <u>Italy</u>	" against whom	<u>Italy</u>	" against whom
Laboratory Statement <u>495 E. Henrietta Rd. - Rochester, N.Y.</u> Date <u>4/1/55</u>	(Name and address of laboratory) (Test completed)	<u>495 E. Henrietta Rd. - Rochester, N.Y.</u> Date <u>4/1/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Eric Jacobson - 10 E. Church St. - Fairport, N.Y.</u> Date <u>3/30/55</u>	(Name and address of physician) (Specimens taken)	<u>Eric Jacobson - 10 E. Church St. - Fairport, N.Y.</u> Date <u>3/30/55</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	<u>were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		_____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		_____ Relation _____ Date _____	
Proof of age _____ (Form)		_____ (Form)	
Date: Affidavit <u>4/9/55</u> License <u>4/9/55 - 11:35 A.M.</u> Marriage <u>4/16/55 - 11:00 A.M.</u> Place of Marriage <u>Rochester, N.Y.</u>	(Month) (Day) (Year) (Hour)	(Month) (Day) (Year) (Hour)	(Month) (Day) (Year) (Hour)
Official <u>Sigmund St. George</u> Profession <u>Catholic Priest</u>	(Name and address of official)	<u>Elvira J. Bianchi - 38 Warner St. - Rochester, N.Y.</u>	Witness <u>Domenico Taraglio - 71 East Ave. - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>11:35 A.M.</u> on the <u>16</u> day of <u>April</u> 19 <u>55</u> and ends the <u>8</u> day of <u>June</u> 19 <u>55</u>			

Reported to State Dept of Health 5/15/55

City Perinton County Monroe STATE OF NEW YORK No. 12
Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Earle Johnson</u>	Color <u>White</u>	<u>Grace Anita Balmas</u>	Color <u>White</u>
Residence <u>43 Elba St. - Rochester, N.Y.</u>	Age <u>74 - 3/29/1881</u>	<u>43 Elba St. - Rochester, N.Y.</u>	Age <u>68 - 1/26/1887</u>
Occupation <u>Retired</u>	No. of marriage <u>2nd</u>	<u>Housework - own home</u>	No. of marriage <u>2nd</u>
Birthplace <u>Port Jervis, N.Y.</u>	Former wife or wives living or dead. <u>dead</u>	<u>Monticello, N.Y.</u>	Former husband or husbands living or dead. <u>dead</u>
Father <u>William Boyce Johnson</u>	Divorced	<u>Eugene Smith</u>	Divorced
Birthplace <u>U.S.</u>	" when	<u>U.S.</u>	" when
Mother <u>Caroline Hazen</u>	" where	<u>Willie Frances Sager</u>	" where
Birthplace <u>U.S.</u>	" against whom	<u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab. - Univ. of Rochester</u> Date <u>4/5/55</u>	(Name and address of laboratory) (Test completed)	<u>Rochester Health Bureau Lab. - Univ. of Rochester</u> Date <u>4/4/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Charles T. Sumford - 574 Charissa St. - Rochester, N.Y.</u> Date <u>4/1/55</u>	(Name and address of physician) (Specimens taken)	<u>Charles T. Sumford - 574 Charissa St. - Rochester, N.Y.</u> Date <u>4/1/55</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	<u>were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		_____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		_____ Relation _____ Date _____	
Proof of age _____ (Form)		_____ (Form)	
Date: Affidavit <u>4/9/55</u> License <u>4/9/55 - 12:02 P.M.</u> Marriage <u>4/12/55 - 6:58 P.M.</u> Place of Marriage <u>Perinton, N.Y.</u>	(Month) (Day) (Year) (Hour)	(Month) (Day) (Year) (Hour)	(Month) (Day) (Year) (Hour)
Official <u>Bruce M. Brown</u> Profession <u>Justice of the Peace</u>	(Name and address of official)	<u>Clara O. Jones - 162 5th St. - Rochester, N.Y.</u>	Witness <u>Edward H. Jones - 162 5th St. - Rochester, N.Y.</u>
Period for solemnization of marriage begins at <u>12:02 P.M.</u> on the <u>10</u> day of <u>April</u> 19 <u>55</u> and ends the <u>8</u> day of <u>June</u> 19 <u>55</u>			

Reported to State Dept of Health 5/15/55

City Perinton County Monroe STATE OF NEW YORK No. 13
Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>William Francis Cottrell</u>	Color <u>White</u>	<u>Antoinette Marie Cook</u>	Color <u>White</u>
Residence <u>21 Osborn Rd. - Fairport, N.Y.</u>	Age <u>21 - 7/30/33</u>	<u>175 W. Church St. - Fairport, N.Y.</u>	Age <u>18 - 4/19/36</u>
Occupation <u>Machinist's Apprentice - U.S. Navy</u>	No. of marriage <u>1st</u>	<u>Accountant - Kodak Park</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport, N.Y.</u>	Former wife or wives living or dead.	<u>Lackawanna, N.Y.</u>	Former husband or husbands living or dead.
Father <u>William Charles Cottrell</u>	Divorced	<u>Richard Eugene Cook</u>	Divorced
Birthplace <u>U.S.</u>	" when	<u>U.S.</u>	" when
Mother <u>Loretta Lora Hembrock</u>	" where	<u>Gertrude Helen Holcomb</u>	" where
Birthplace <u>U.S.</u>	" against whom	<u>U.S.</u>	" against whom
Laboratory Statement <u>Infirmiry - U.S. Naval Station - San Francisco, Calif.</u> Date <u>3/29/55</u>	(Name and address of laboratory) (Test completed)	<u>495 E. Henrietta Rd. - Rochester, N.Y.</u> Date <u>4/8/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Cyrus J. Thorne - Infirmiry - U.S. Naval Station - San Francisco, Calif.</u> Date <u>3/29/55</u>	(Name and address of physician) (Specimens taken)	<u>John Kraus, 34 S. Main St. - Fairport, N.Y.</u> Date <u>4/4/55</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	<u>were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		_____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		_____ Relation _____ Date _____	
Proof of age _____ (Form)		_____ (Form)	
Date: Affidavit <u>4/11/55</u> License <u>4/11/55 - 1:32 P.M.</u> Marriage <u>4/16/55 - 7:00 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	(Month) (Day) (Year) (Hour)	(Month) (Day) (Year) (Hour)
Official <u>Donald A. Rappaport</u> Profession <u> Lutheran Clergyman</u>	(Name and address of official)	<u>Virginia H. Schrader, 21 DeForest Park B. - Fairport, N.Y.</u>	Witness <u>Richard C. Cottrell, 21 Osborn Rd. - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>1:32 P.M.</u> on the <u>12</u> day of <u>April</u> 19 <u>55</u> and ends the <u>10</u> day of <u>June</u> 19 <u>55</u>			

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 14
 Town Perinton Clerk Elizabeth H. Pierce

Reported to State Dept of Health 5/15/55
 Mailed to State Dept of Health 5/15/55

GROOM		BRIDE	
Name <u>Richard Otto Sanders</u>	Color <u>white</u>	Name <u>Dorothy May Wilford</u>	Color <u>white</u>
Residence <u>3 Wilbur St - Rochester, N.Y.</u>	Age <u>21 - 6/26/33</u>	Residence <u>202 W. Linden Ave. - Rochester, N.Y.</u>	Age <u>18 - 7/9/36</u>
Occupation <u>Stock Keeper - Instrument Co.</u>	No. of marriage <u>1st</u>	Occupation <u>Telephone Operator - Telephone Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Abner William Sanders</u>	Divorced	Father <u>George Edward Wilford</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Mary Ann</u>	" where	Mother <u>Alma Ida May Leicourt</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories - Rochester 20, N.Y.</u> Date <u>4/12/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories - Rochester 20, N.Y.</u> Date <u>4/12/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Jerome H. Amasanti - 239 W. Ave. E. Rochester, N.Y.</u> Date <u>4/8/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Jerome H. Amasanti, 239 W. Ave. E. Rochester, N.Y.</u> Date <u>4/8/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>4/12/55</u> License <u>4/12/55 - 4:43 P.M.</u> Marriage <u>4/16/55 - 11:00 A.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>4/12/55</u> License <u>4/12/55 - 4:43 P.M.</u> Marriage <u>4/16/55 - 11:00 A.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>	Witness <u>Caroline Wilford - E. Rochester, N.Y.</u>	Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>	Witness <u>Caroline Wilford - E. Rochester, N.Y.</u>
Period for solemnization of marriage begins at <u>2:43 P.M.</u> on the <u>13</u> day of <u>April</u> 19 <u>55</u> and ends the <u>11</u> day of <u>June</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>2:43 P.M.</u> on the <u>13</u> day of <u>April</u> 19 <u>55</u> and ends the <u>11</u> day of <u>June</u> 19 <u>55</u>	

City Perinton County Monroe STATE OF NEW YORK No. 15
 Town Perinton Clerk Charlotte Clapp

Reported to State Dept of Health 5/15/55
 Mailed to State Dept of Health 5/15/55

GROOM		BRIDE	
Name <u>Harry Stow Crider</u>	Color <u>white</u>	Name <u>Anna Trask</u>	Color <u>white</u>
Residence <u>255 Keagy Rd. - Fairport, N.Y.</u>	Age <u>63 - 1/4/1892</u>	Residence <u>255 Keagy Rd. - Fairport, N.Y.</u>	Age <u>56 - 7/25/1898</u>
Occupation <u>Meat cutter - market</u>	No. of marriage <u>2nd</u>	Occupation <u>at home</u>	No. of marriage <u>2nd</u>
Birthplace <u>York Haven, Penna.</u>	Former wife or wives living or dead. <u>dead</u>	Birthplace <u>Odessa, Russia</u>	Former husband or husbands living or dead. <u>dead</u>
Father <u>Henry Crider</u>	Divorced	Father <u>Feodor Sapenbo</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Russia</u>	" when
Mother <u>Annetta Stueb</u>	" where	Mother <u>Anna (Anderson)</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Russia</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories - Rochester 20, N.Y.</u> Date <u>4/12/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories - Rochester 20, N.Y.</u> Date <u>4/12/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai - 84 S. Main St. - Fairport, N.Y.</u> Date <u>4/7/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraai - 84 S. Main St. - Fairport, N.Y.</u> Date <u>4/7/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>4/13/55</u> License <u>4/13/55 - 1:58 P.M.</u> Marriage <u>4/16/55 - 9:45 A.M.</u> Place of Marriage <u>Perinton, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>4/13/55</u> License <u>4/13/55 - 1:58 P.M.</u> Marriage <u>4/16/55 - 9:45 A.M.</u> Place of Marriage <u>Perinton, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Bruce H. Brown</u> Profession <u>Justice of Peace</u>	Witness <u>Boatman Wroblewski - Fairport, N.Y.</u>	Official <u>Bruce H. Brown</u> Profession <u>Justice of Peace</u>	Witness <u>Boatman Wroblewski - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>1:58 P.M.</u> on the <u>14</u> day of <u>April</u> 19 <u>55</u> and ends the <u>12</u> day of <u>June</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>1:58 P.M.</u> on the <u>14</u> day of <u>April</u> 19 <u>55</u> and ends the <u>12</u> day of <u>June</u> 19 <u>55</u>	

City Perinton County Monroe STATE OF NEW YORK No. 16
 Town Perinton Clerk Charlotte Clapp

Reported to State Dept of Health 5/15/55
 Mailed to State Dept of Health 5/15/55

GROOM		BRIDE	
Name <u>Frank Martin Miner</u>	Color <u>white</u>	Name <u>Wanda Phoebe VanHorne</u>	Color <u>white</u>
Residence <u>20 Park St. - Fairport, N.Y.</u>	Age <u>20 - 4/10/35</u>	Residence <u>12 Suffolk St. - Fairport, N.Y.</u>	Age <u>20 - 4/7/35</u>
Occupation <u>Infantry - U.S. Marine Corp.</u>	No. of marriage <u>1st</u>	Occupation <u>clerk - insurance</u>	No. of marriage <u>1st</u>
Birthplace <u>Syracuse, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Albany, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Orvin Franklin Miner</u>	Divorced	Father <u>Harry Franklin VanHorne</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Eva Rier</u>	" where	Mother <u>Florence Bessie VanHorne</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories - Rochester 20, N.Y.</u> Date <u>4/8/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories - Rochester 20, N.Y.</u> Date <u>4/8/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Wilbur S. Buhlert - 20 W. Church St. - Fairport, N.Y.</u> Date <u>4/5/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Wilbur S. Buhlert - 20 W. Church St. - Fairport, N.Y.</u> Date <u>4/5/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by <u>Orvin F. Miner</u> Relation <u>father</u> Date <u>4/14/55</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Eva Miner</u> Relation <u>Mother</u> Date <u>4/14/55</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>4/14/55</u> License <u>4/14/55 - 1:27 P.M.</u> Marriage <u>4/16/55 - 10:00 A.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>4/14/55</u> License <u>4/14/55 - 1:27 P.M.</u> Marriage <u>4/16/55 - 10:00 A.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Donald A. Kelly</u> Profession <u>Catholic Priest</u>	Witness <u>John B. VanHorne - 12 Suffolk St. - Fairport, N.Y.</u>	Official <u>Donald A. Kelly</u> Profession <u>Catholic Priest</u>	Witness <u>John B. VanHorne - 12 Suffolk St. - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>1:27 P.M.</u> on the <u>15</u> day of <u>April</u> 19 <u>55</u> and ends the <u>13</u> day of <u>June</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>1:27 P.M.</u> on the <u>15</u> day of <u>April</u> 19 <u>55</u> and ends the <u>13</u> day of <u>June</u> 19 <u>55</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 17

Deputy Clerk Elizabeth H. Peirce

Reported to State Health 5/15/55
mailed to State Dept of Health 5/15/55

GROOM		BRIDE	
Name <u>Wallace Melvin Whitlock</u>	Color <u>white</u>	Name <u>Mary Louise Lancaster</u>	Color <u>white</u>
Residence <u>21 Wata St. - Fairport, N.Y.</u>	Age <u>29 - 5/19/25</u>	Residence <u>25 S. Main St. - Fairport, N.Y.</u>	Age <u>35 - 1/3/20</u>
Occupation <u>Dishwasher - Restaurant</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Bath, Maine</u>	Former husband or husbands living or dead
Father <u>Frank Whitlock</u>	Divorced	Father <u>Albert Henry Lancaster</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Helen F. Fuller</u>	" where	Mother <u>Rosina De Maas</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>4/12/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>4/12/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Dr. Jacobson 10 E. Church St. Fairport, N.Y.</u> Date <u>4/7/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Dr. Jacobson 10 E. Church St. - Fairport, N.Y.</u> Date <u>4/7/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>were not</u> dispensed with by judge or justice (Were or were not)	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>4/14/55</u> License <u>4/14/55 - 3:32 P.M.</u> Marriage <u>4/16/55 - 3:00 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>4/14/55</u> License <u>4/14/55 - 3:32 P.M.</u> Marriage <u>4/16/55 - 3:00 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Lee Clendenning - 12 E. Church St. Fairport, N.Y.</u> Profession <u>Minister</u>	Witness <u>Frank Whitlock - Fairport, N.Y.</u>	Official <u>Lee Clendenning - 12 E. Church St. Fairport, N.Y.</u> Profession <u>Minister</u>	Witness <u>Frank Whitlock - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>3:32 P.M.</u> on the <u>15</u> day of <u>April</u> 19 <u>55</u> and ends the <u>13</u> day of <u>June</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>3:32 P.M.</u> on the <u>15</u> day of <u>April</u> 19 <u>55</u> and ends the <u>13</u> day of <u>June</u> 19 <u>55</u>	

City Perinton County Monroe STATE OF NEW YORK No. 18

Deputy Clerk Elizabeth H. Peirce

Reported to State Health 5/15/55
mailed to State Dept of Health 5/15/55

GROOM		BRIDE	
Name <u>Paul John Heratner</u>	Color <u>white</u>	Name <u>Shirley Ann Diehl</u>	Color <u>white</u>
Residence <u>15 South Ave. - Fairport, N.Y.</u>	Age <u>19 - 4/19/35</u>	Residence <u>201 Jefferson Ave. - Fairport, N.Y.</u>	Age <u>18 - 12/18/36</u>
Occupation <u>Truck driver - Greenhouses</u>	No. of marriage <u>1st</u>	Occupation <u>Typist - Telephone Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Harold Charles Heratner</u>	Divorced	Father <u>Harvey John Diehl</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Maria Antoinette Heislein</u>	" where	Mother <u>Madelina Elizabeth Henry</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>3/25/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>3/25/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>A.R. Hurley - 601 Main St. E. Rochester, N.Y.</u> Date <u>3/24/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>A.R. Hurley - 601 Main St. - E. Rochester, N.Y.</u> Date <u>3/24/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>were not</u> dispensed with by judge or justice (Were or were not)	
Consent by <u>Harold C. Heratner</u> Relation <u>father</u> Date <u>4/16/55</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>(mother dead)</u> Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certified copy of birth record</u> (Form)		Proof of age <u>Certified copy of birth record</u> (Form)	
Date: Affidavit <u>4/16/55</u> License <u>4/16/55 - 10:33 A.M.</u> Marriage <u>4/23/55 - 9:00 A.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>4/16/55</u> License <u>4/16/55 - 10:33 A.M.</u> Marriage <u>4/23/55 - 9:00 A.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Leonard A. Kelly 20 East Ave. Fairport, N.Y.</u> Profession <u>Catholic Priest</u>	Witness <u>Bernard E. Pucheltz - 32 Park Ave. Fairport, N.Y.</u>	Official <u>Leonard A. Kelly 20 East Ave. Fairport, N.Y.</u> Profession <u>Catholic Priest</u>	Witness <u>Clara Basile - 122 W. Main St. - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>10:33 A.M.</u> on the <u>17</u> day of <u>April</u> 19 <u>55</u> and ends the <u>15</u> day of <u>June</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>10:33 A.M.</u> on the <u>17</u> day of <u>April</u> 19 <u>55</u> and ends the <u>15</u> day of <u>June</u> 19 <u>55</u>	

City Perinton County Monroe STATE OF NEW YORK No. 19

Deputy Clerk Charlotte Clapp

Reported to State Dept of Health 6/1/55
mailed to State Dept of Health 6/6/55

GROOM		BRIDE	
Name <u>Daniel Christian Brown, Jr.</u>	Color <u>white</u>	Name <u>Mary Elizabeth Peace Unger</u>	Color <u>white</u>
Residence <u>13 New St. - Ontario, N.Y.</u>	Age <u>19 - 6/30/35</u>	Residence <u>13 New St. - Ontario, N.Y.</u>	Age <u>19 - 11/26/35</u>
Occupation <u>Manager - Coal Washing</u>	No. of marriage <u>1st</u>	Occupation <u>Inspector in factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Harrisburg, Penna.</u>	Former wife or wives living or dead	Birthplace <u>Pottsville, Penna.</u>	Former husband or husbands living or dead
Father <u>Daniel Christian Brown</u>	Divorced	Father <u>Clarence Franklin Unger</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Margaret Alice Nagle</u>	" where	Mother <u>Catherine Elizabeth Buehler</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>N.Y. State Dept of Health</u> Date <u>4/27/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>N.Y. State Dept of Health</u> Date <u>4/27/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>H.R. Loomis - 16 Knickerbocker Rd. Ontario, N.Y.</u> Date <u>4/25/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>H.R. Loomis - 16 Knickerbocker Rd. Ontario, N.Y.</u> Date <u>4/25/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>were not</u> dispensed with by judge or justice (Were or were not)	
Consent by <u>Fredrick Dean Mc Cune, Jr.</u> Relation <u>Guardian</u> Date <u>5/2/55</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>(Both parents deceased)</u> Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>5/2/55</u> License <u>5/2/55 - 7:15 P.M.</u> Marriage <u>5/7/55 - 5 P.M.</u> Place of Marriage <u>Webster, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>5/2/55</u> License <u>5/2/55 - 7:15 P.M.</u> Marriage <u>5/7/55 - 5 P.M.</u> Place of Marriage <u>Webster, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Franklin K. Blanks 145 W. Main St. - Webster, N.Y.</u> Profession <u>Clergyman</u>	Witness <u>Frank E. Mc Cune - P.O. Box 40, Ontario, N.Y.</u>	Official <u>Franklin K. Blanks 145 W. Main St. - Webster, N.Y.</u> Profession <u>Clergyman</u>	Witness <u>Frank E. Mc Cune - 13 Main St. Ontario, N.Y.</u>
Period for solemnization of marriage begins at <u>7:15 P.M.</u> on the <u>3</u> day of <u>May</u> 19 <u>55</u> and ends the <u>1</u> day of <u>July</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>7:15 P.M.</u> on the <u>3</u> day of <u>May</u> 19 <u>55</u> and ends the <u>1</u> day of <u>July</u> 19 <u>55</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 20
 Town Perinton Clerk Charlotte Clapp

Reported to State Dept +
 mailed to State Dept +
 6/1/55
 6/1/55
 6/1/55

GROOM

Name James Charles McGuire Color White
 Residence 114 Quaker Pk. - Fairport, N.Y. Age 21 - 1/17/34
 Occupation Craftsman - Surveying No. of marriage 1st
 Birthplace Canaan, N.Y. Former wife or wives living or dead.
 Father Bernard James McGuire Divorced
 Birthplace U.S. " when _____
 Mother Estelle Mary Butler " where _____
 Birthplace U.S. " against whom _____
 Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. Date 4/22/55
 Physician's Statement Wilbur S. Buhloltz - 20 W. Church St. - Fairport, N.Y. Date 4/19/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date Affidavit 5/5/55 License 5/5/55 - 7:16 P.M. Marriage 5/14/55 - 10:00 A.M. Place of Marriage Fairport, N.Y.
 Official Leonard A. Kelly Profession Catholic Priest Witness Samuel P. Carlini - 63 High St. - Fairport, N.Y.
 Period for solemnization of marriage begins at 7:16 P.M. on the 6 day of May 1955 and ends the 4 day of July 1955

BRIDE

Name Patricia Jean Ramp Color White
 Residence 12 Quaker Pk. - Fairport, N.Y. Age 19 - 6/14/35
 Occupation Comptometer Operator - Kodak factory No. of marriage 1st
 Birthplace Ontario, N.Y. Former husband or husbands living or dead.
 Father Vernon Philip Ramp Divorced
 Birthplace U.S. " when _____
 Mother Doris Hazel Becker " where _____
 Birthplace U.S. " against whom _____
 Laboratory Statement Mon. Co. Laboratories - Rochester, N.Y. Date 4/22/55
 Physician's Statement Wilbur S. Buhloltz - 20 W. Church St. - Fairport, N.Y. Date 4/19/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date Affidavit _____ License _____ Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1955 and ends the _____ day of _____ 1955

City Perinton County Monroe STATE OF NEW YORK No. 21
 Town Perinton Clerk Charlotte Clapp

Reported to State Dept +
 mailed to State Dept +
 6/1/55
 7/5/55

GROOM

Name Anthony D'Amora Color White
 Residence 212 E. Elm St. - E. Rochester, N.Y. Age 34 - 12/2/20
 Occupation Tailoring - Tailor No. of marriage 1st
 Birthplace Rochester, N.Y. Former wife or wives living or dead.
 Father Charles D'Amora Divorced
 Birthplace Italy " when _____
 Mother Mary Yacono " where _____
 Birthplace Italy " against whom _____
 Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. Date 5/1/55
 Physician's Statement Joseph J. Hader - E. Rochester, N.Y. Date 5/13/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date Affidavit 5/16/55 License 5/16/55 - 7:10 P.M. Marriage 6/4/55 - 10 A.M. Place of Marriage East Rochester, N.Y.
 Official Ray B. Murphy Profession Catholic Priest Witness Joseph Monachino - E. Rochester, N.Y.
 Period for solemnization of marriage begins at 7:00 P.M. on the 17 day of May 1955 and ends the 15 day of July 1955

BRIDE

Name Antoinette Monachino Color White
 Residence 138 E. Chestnut St. - E. Rochester, N.Y. Age 32 - 7/14/22
 Occupation Operator - Can factory No. of marriage 1st
 Birthplace East Rochester, N.Y. Former husband or husbands living or dead.
 Father Frank Monachino Divorced
 Birthplace Italy " when _____
 Mother Assunta Fiamaca " where _____
 Birthplace Italy " against whom _____
 Laboratory Statement Monroe Co. Laboratories - Rochester, N.Y. Date 5/6/55
 Physician's Statement Joseph J. Hader - E. Rochester, N.Y. Date 5/3/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date Affidavit _____ License _____ Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1955 and ends the _____ day of _____ 1955

City Perinton County Monroe STATE OF NEW YORK No. 22
 Town Perinton Clerk Charlotte Clapp

Reported to State Dept +
 mailed to State Dept +
 7/5/55
 7/5/55

GROOM

Name Thomas Joseph Collins Color White
 Residence 1305 Lindenwood Court, Troy, N.Y. Age 27 - 2/24/28
 Occupation Clerk - Accounting No. of marriage 1st
 Birthplace Troy, N.Y. Former wife or wives living or dead.
 Father Frank Michael Collins Divorced
 Birthplace U.S. " when _____
 Mother Elizabeth Bohner " where _____
 Birthplace U.S. " against whom _____
 Laboratory Statement Ellis Hospital - Schenectady, N.Y. Date 5/23/55
 Physician's Statement Arthur D. Panta - 1301 Union St. - Schenectady, N.Y. Date 5/20/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date Affidavit 6/4/55 License 6/4/55 - 10:55 A.M. Marriage June 10 1955 8 P.M. Place of Marriage Pittsford, N.Y.
 Official F. Ross Johnson Profession Justice of the Peace Witness Richard B. Cole - Pittsford, N.Y.
 Period for solemnization of marriage begins at 10:55 A.M. on the 5 day of June 1955 and ends the 3 day of August 1955

BRIDE

Name Hancy Elsie Watson Color White
 Residence 267 Calhoun Ave. - Rochester, N.Y. Age 28 - 3/5/27
 Occupation Operator - Accounting No. of marriage 1st
 Birthplace Fort Plain, N.Y. Former husband or husbands living or dead.
 Father George Watson Divorced
 Birthplace U.S. " when _____
 Mother Helen Dorothy Hoffman " where _____
 Birthplace U.S. " against whom _____
 Laboratory Statement Rochester Health Bureau Lab. - Rochester 20, N.Y. Date 5/24/55
 Physician's Statement Kenneth J. Martini - 265 Alexander St. - Rochester, N.Y. Date 5/24/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date Affidavit _____ License _____ Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1955 and ends the _____ day of _____ 1955

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 23
 Clerk Charlatti Clapp

GROOM		BRIDE	
Name <u>Lia Robert Bross</u>	Color <u>white</u>	Name <u>Roberta Myers</u>	Color <u>white</u>
Residence <u>R.D. Palmyra, N.Y.</u>	Age <u>26 - 7/2/29</u>	Residence <u>44 Hubbard Ave., Fairport, N.Y.</u>	Age <u>19 - 8/15/35</u>
Occupation <u>Designer, Automobile Parts</u>	No. of marriage <u>1st</u>	Occupation <u>Clerical - Film testing</u>	No. of marriage <u>1st</u>
Birthplace <u>Palmyra, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead
Father <u>Charles Henry Bross</u>	Divorced	Father <u>John Henry Myers</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Minnie Edith Wiepert</u>	" where	Mother <u>Mary Madeline Flemer</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Mon. Q. Sabatone, 435 E. Henrietta Rd., Rochester 20, N.Y.</u> Date <u>6/1/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Mon. Q. Sabatone, 435 E. Henrietta Rd., Rochester 20, N.Y.</u> Date <u>6/1/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Wilbur S. Bushnell, 20 W. Church St., Fairport, N.Y.</u> Date <u>5/27/55</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Wilbur S. Bushnell - 20 W. Church St., Fairport, N.Y.</u> Date <u>5/27/55</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>6/4/55</u> License <u>6/4/55-12:02 P.</u> Marriage <u>June 18 1955 7:15 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>6/4/55</u> License <u>6/4/55-12:02 P.</u> Marriage <u>June 18 1955 7:15 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Lia C. Clapp</u> Profession <u>Minister</u> Witness <u>Harold A. Bross, Palmyra N.Y.</u>		Official <u>Lia C. Clapp</u> Profession <u>Minister</u> Witness <u>Harold A. Bross, Palmyra N.Y.</u>	
Period for solemnization of marriage begins at <u>12:02 P.M.</u> on the <u>5</u> day of <u>June</u> 19 <u>55</u> and ends the <u>3rd</u> day of <u>August</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>12:02 P.M.</u> on the <u>5</u> day of <u>June</u> 19 <u>55</u> and ends the <u>3rd</u> day of <u>August</u> 19 <u>55</u>	

Reported to State Com. Health 7/1/55
 Mailed to State Dept of Health 7/5/55

City Perinton County Monroe STATE OF NEW YORK No. 24
 Deputy Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>James Harmon Hagenbuch</u>	Color <u>white</u>	Name <u>Rose Ann Ashton</u>	Color <u>white</u>
Residence <u>124 S. Commercial St., Rochester N.Y.</u>	Age <u>22 4/3/33</u>	Residence <u>324 E. Elm St., Rochester N.Y.</u>	Age <u>20 9/9/34</u>
Occupation <u>Painter General Contracting</u>	No. of marriage <u>1st</u>	Occupation <u>Tabulating I.B.M.</u>	No. of marriage <u>1st</u>
Birthplace <u>Shicklinton Pa.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Robert Gordon Hagenbuch</u>	Divorced	Father <u>John James Ashton</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Mattie Malinda Pampfacker</u>	" where	Mother <u>Jean Hamilton</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Scotland</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Road, Rochester 20 Monroe County Laboratories</u> Date <u>6/7/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Road, Rochester 20 Monroe County Laboratories</u> Date <u>6/7/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Eric J. Jacobsen M.D., Fairport N.Y.</u> Date <u>6/2/55</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Eric J. Jacobsen M.D., Fairport N.Y.</u> Date <u>6/2/55</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 11 1955 11:26 A.M.</u> License <u>June 11 1955 11:26 A.M.</u> Marriage <u>June 18 1955 3 P.M.</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>June 11 1955 11:26 A.M.</u> License <u>June 11 1955 11:26 A.M.</u> Marriage <u>June 18 1955 3 P.M.</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Harold C. Paul</u> Profession <u>Cryman</u> Witness <u>John C. Adams, 46 Vine St., Shicklinton Pa.</u>		Official <u>Harold C. Paul</u> Profession <u>Cryman</u> Witness <u>John C. Adams, 46 Vine St., Shicklinton Pa.</u>	
Period for solemnization of marriage begins at <u>11:26 A.M.</u> on the <u>12</u> day of <u>June</u> 19 <u>55</u> and ends the <u>10</u> day of <u>August</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>11:26 A.M.</u> on the <u>12</u> day of <u>June</u> 19 <u>55</u> and ends the <u>10</u> day of <u>August</u> 19 <u>55</u>	

Reported to State Com. Health 7/1/55
 Mailed to State Dept of Health 7/5/55

City Perinton County Monroe STATE OF NEW YORK No. 25
 Clerk Charlatti Clapp

GROOM		BRIDE	
Name <u>Carl Albert Wells</u>	Color <u>white</u>	Name <u>Ida Marie Masciangelo</u>	Color <u>white</u>
Residence <u>1810 Parkfield Road, Fairport N.Y.</u>	Age <u>21 8/23/33</u>	Residence <u>85 High St., Fairport N.Y.</u>	Age <u>23 12/27/31</u>
Occupation <u>Shipping Can factory</u>	No. of marriage <u>1st</u>	Occupation <u>Assembler Kodak factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Potdam N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport N.Y.</u>	Former husband or husbands living or dead
Father <u>Glenn Eugene Wells</u>	Divorced	Father <u>Vincent James Masciangelo</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Ether May Trumble</u>	" where	Mother <u>Terese Picini</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe Co., Palmyra 435 E. Henrietta Road Rochester</u> Date <u>6/10/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe Co., Palmyra 435 E. Henrietta Road Rochester N.Y.</u> Date <u>6/10/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>J. H. McEachern, 70 S. Main St., Fairport N.Y.</u> Date <u>6/8/55</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>J. H. McEachern, Fairport N.Y.</u> Date <u>6/8/55</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 18 1955 11:40 A.M.</u> License <u>June 18 1955 11:40 A.M.</u> Marriage <u>June 25 1955 10 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>June 18 1955 11:40 A.M.</u> License <u>June 18 1955 11:40 A.M.</u> Marriage <u>June 25 1955 10 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Harold A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Harold Smith, 86 Kenwood Ave., N.Y.</u>		Official <u>Harold A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Harold Smith, 86 Kenwood Ave., N.Y.</u>	
Period for solemnization of marriage begins at <u>11:40 A.M.</u> on the <u>19</u> day of <u>June</u> 19 <u>55</u> and ends the <u>17</u> day of <u>August</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>11:40 A.M.</u> on the <u>19</u> day of <u>June</u> 19 <u>55</u> and ends the <u>17</u> day of <u>August</u> 19 <u>55</u>	

Reported to State Com. Health 7/1/55
 Mailed to State Dept of Health 7/5/55

RECORD OF MARRIAGES

Referred to State Dept of Health 7/1/55
 Referred to State Dept of Health 8/15/55
 Referred to State Dept of Health 7/1/55
 Referred to State Dept of Health 8/15/55
 Referred to State Dept of Health 7/1/55
 Referred to State Dept of Health 8/15/55

City Perinton County Monroe STATE OF NEW YORK No. 26
 Deputy Clerk Elizabeth H. Pierce

GROOM

Name Steven Edward Duval Color White
 Residence 122 N. Main St Fairport NY Age 21 12/16/33
 Occupation Forman Paint factory No. of marriage 1st
 Birthplace Ellensburg NY Former wife or wives living or dead
 Father Joseph Steven Duval Divorced
 Birthplace U.S. " when
 Mother Carrie Alice King " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY Date 6/21/55
 Physician's Statement John Kraai MD Fairport NY Date 6/16/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age Baptismal record (Form) _____ Date
 Date: Affidavit June 23 1955 License June 23 1955 10:03 P.M. Marriage July 2 1955 10 A.M. Place of Marriage East Rochester NY
 Official Ray B. Murphy Profession Catholic Priest Witness Katherine Mary Fairport NY
 Period for solemnization of marriage begins at 5:03 P.M. on the 24 day of June 1955 and ends the 22 day of August 1955

BRIDE

Name Nancy Ann Winney Color White
 Residence 302 Bluff Road E. Rochester NY Age 18 8/11/36
 Occupation Payroll Clerk Plains Co. No. of marriage 1st
 Birthplace Perinton NY Former husband or husbands living or dead
 Father Russell Hecksman Divorced
 Birthplace U.S. " when
 Mother Sarah Frances Winney " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY Date 6/21/55
 Physician's Statement John Kraai MD Fairport NY Date 6/16/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age Certification of birth (Form) _____ Date
 Date: Affidavit June 23 1955 License June 23 1955 5:03 P.M. Marriage July 2 1955 10 A.M. Place of Marriage East Rochester NY
 Official Ray B. Murphy Profession Catholic Priest Witness Katherine Mary Fairport NY
 Period for solemnization of marriage begins at 5:03 P.M. on the 24 day of June 1955 and ends the 22 day of August 1955

City Perinton County Monroe STATE OF NEW YORK No. 27
 Deputy Clerk Elizabeth H. Pierce

GROOM

Name Achille Amadeo La Mendola Color White
 Residence 300 Canton Ave Danora Pa. Age 32 9/4/22
 Occupation Accountant Radio Co. No. of marriage 1st
 Birthplace Danora Pa Former wife or wives living or dead
 Father Joseph Frank La Mendola Divorced
 Birthplace Italy " when
 Mother Anna Balabanari " where
 Birthplace Italy " against whom

Laboratory Statement Rochester Health Bureau Rochester NY Date June 8 1955
 Physician's Statement Charles R Harris MD E. Rochester NY Date June 6 1955
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form) _____ Date
 Date: Affidavit June 25 1955 License June 25 1955 11:26 P.M. Marriage 7-4-1955 10:00 A.M. Place of Marriage East Rochester, N.Y.
 Official Ray B. Murphy Profession Catholic Priest Witness Pasqual Acciari - 118 E. Commercial St., E. Rochester, N.Y.
 Period for solemnization of marriage begins at 11:26 A.M. on the 26 day of June 1955 and ends the 24 day of August 1955

BRIDE

Name Yolanda Acciari Color White
 Residence 118 E. Commercial St E. Rochester NY Age 28 5/16/27
 Occupation Office Clerk Fuel service NY No. of marriage 1st
 Birthplace Charlotte NY Former husband or husbands living or dead
 Father Nicholas Acciari Divorced
 Birthplace Italy " when
 Mother Rose Mary Pugliese " where
 Birthplace Italy " against whom

Laboratory Statement Rochester Health Bureau Rochester NY Date June 8 1955
 Physician's Statement Charles R Harris MD E. Rochester NY Date June 6 1955
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form) _____ Date
 Date: Affidavit June 25 1955 License June 25 1955 11:26 P.M. Marriage 7-4-1955 10:00 A.M. Place of Marriage East Rochester, N.Y.
 Official Ray B. Murphy Profession Catholic Priest Witness Pasqual Acciari - 118 E. Commercial St., E. Rochester, N.Y.
 Period for solemnization of marriage begins at 11:26 A.M. on the 26 day of June 1955 and ends the 24 day of August 1955

City Perinton County Monroe STATE OF NEW YORK No. 28
 Clerk Charlotte Claff

GROOM

Name Richard Ketteroff Savidge Color White
 Residence 601 S. Washington St E. Rochester Age 23 8/12/32
 Occupation weaver weaving No. of marriage 1st
 Birthplace Rochester NY Former wife or wives living or dead
 Father Guy Richard Savidge Divorced
 Birthplace U.S. " when
 Mother Hazel Borkenshine " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY Date June 21 1955
 Physician's Statement John Kraai Fairport NY Date June 18 1955
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form) _____ Date
 Date: Affidavit June 30 1955 License June 30 1955 10:55 A.M. Marriage July 8 1955 7:15 P.M. Place of Marriage East Rochester NY
 Official Richard C. Paul Profession Deacon Witness Grace E. Duval 172 N. Main St Fairport NY
 Period for solemnization of marriage begins at 10:55 A.M. on the 24 day of July 1955 and ends the 30 day of August 1955

BRIDE

Name Jean Bernice Price Color White
 Residence 227 E. Commercial St E. Rochester Age 20 9/19/34
 Occupation Operator Business Machines No. of marriage 1st
 Birthplace Syracuse NY Former husband or husbands living or dead
 Father George Joseph Price Divorced
 Birthplace U.S. " when
 Mother Elizabeth Alice Moore " where
 Birthplace Canada " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY Date June 21 1955
 Physician's Statement John Kraai MD Fairport NY Date June 18 1955
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form) _____ Date
 Date: Affidavit June 30 1955 License June 30 1955 10:55 A.M. Marriage July 8 1955 7:15 P.M. Place of Marriage East Rochester NY
 Official Richard C. Paul Profession Deacon Witness Grace E. Duval 172 N. Main St Fairport NY
 Period for solemnization of marriage begins at 10:55 A.M. on the 24 day of July 1955 and ends the 30 day of August 1955

RECORD OF MARRIAGES

Mailed to State Dept. Reported to State Com. Health 8/1/55

City Perinton County Monroe STATE OF NEW YORK No. 29
 Town Perinton Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Leon Albert Holcomb</u>	Color <u>White</u>	Name <u>Maud Virginia Tice</u>	Color <u>White</u>
Residence <u>175 W. Church St Fairport NY</u>	Age <u>71</u> <u>2/3/84</u>	Residence <u>175 W. Church St Fairport NY</u>	Age <u>69</u> <u>12/23/85</u>
Occupation <u>Labor Highway</u>	No. of marriage <u>2nd</u>	Occupation <u>Machine Operator Tailoring</u>	No. of marriage <u>3rd</u>
Birthplace <u>Monroe NY</u>	Former wife or wives living or dead <u>Dead</u>	Birthplace <u>Rochester NY</u>	Former husband or husbands living or dead <u>Dead</u>
Father <u>Wesley Albert Holcomb</u>	Divorced	Father <u>Abraham Anderson</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Holland</u>	" when
Mother <u>Mattie Mary Giles</u>	" where	Mother <u>Elizabeth Weston</u>	" where
Birthplace <u>Canada</u>	" against whom	Birthplace <u>Canada</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/24/55</u>	(Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/24/55</u>	(Test completed)
Physician's Statement <u>William S. Bucholtz 20 W. Church St Fairport NY</u> Date <u>6/21/55</u>	(Specimens taken)	Physician's Statement <u>Erich Jacobsen 10 E. Church St Fairport NY</u> Date <u>6/21/55</u>	(Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>July 2 1955</u> License <u>July 2 1955</u> A.M. Marriage <u>9:49</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>7/9/55</u> License <u>7/9/55</u> A.M. Marriage <u>4:40 P</u>	(Month) (Day) (Year) (Hour)
Official <u>Joe Koenig</u> Profession <u>Minister</u>	Place of Marriage <u>Fairport, New York</u>	Official <u>Joseph W. DeLoach</u> Profession <u>Minister</u>	Place of Marriage <u>Fairport, New York</u>
Period for solemnization of marriage begins at <u>9:49</u> A.M. on the <u>3rd</u> day of <u>July</u> 19 <u>55</u> and ends the <u>31st</u> day of <u>August</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>9:49</u> A.M. on the <u>3rd</u> day of <u>July</u> 19 <u>55</u> and ends the <u>31st</u> day of <u>August</u> 19 <u>55</u>	

Mailed to State Dept. Reported to State Com. Health 8/1/55

City Perinton County Monroe STATE OF NEW YORK No. 30
 Town Perinton Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>William Thomas Delequanda</u>	Color <u>White</u>	Name <u>Margaret Jane Cooper</u>	Color <u>White</u>
Residence <u>34 N. Main St Fairport NY</u>	Age <u>29</u> <u>10/20/25</u>	Residence <u>78 Kesselman Ave Fairport NY</u>	Age <u>19</u> <u>Apr 16 1936</u>
Occupation <u>Shipping Can factory</u>	No. of marriage <u>1st</u>	Occupation <u>Clerk Typist Directory advertising</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester NY</u>	Former husband or husbands living or dead
Father <u>Louis Delequanda</u>	Divorced	Father <u>William Ernest Answorth Cofer</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>England</u>	" when
Mother <u>Victoria Moretta</u>	" where	Mother <u>Dorothy Elizabeth Walker</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd Rochester NY</u> Date <u>6/21/55</u>	(Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Rd Rochester NY</u> Date <u>6/21/55</u>	(Test completed)
Physician's Statement <u>William S. Bucholtz 20 W. Church St Fairport NY</u> Date <u>6/17/55</u>	(Specimens taken)	Physician's Statement <u>William S. Bucholtz 20 W. Church St Fairport NY</u> Date <u>6/17/55</u>	(Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>July 9 1955</u> License <u>July 9 1955</u> A.M. Marriage <u>10:04</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>July 14 55</u> License <u>July 14 55</u> A.M. Marriage <u>11:30 A</u>	(Month) (Day) (Year) (Hour)
Official <u>Joe Koenig</u> Profession <u>Catholic Priest</u>	Place of Marriage <u>Fairport NY</u>	Official <u>Joseph W. DeLoach</u> Profession <u>Catholic Priest</u>	Place of Marriage <u>Fairport NY</u>
Period for solemnization of marriage begins at <u>10:04</u> A.M. on the <u>10</u> day of <u>July</u> 19 <u>55</u> and ends the <u>8</u> day of <u>Sept.</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>10:04</u> A.M. on the <u>10</u> day of <u>July</u> 19 <u>55</u> and ends the <u>8</u> day of <u>Sept.</u> 19 <u>55</u>	

Mailed to State Dept. Reported to State Com. Health 8/1/55

City Perinton County Monroe STATE OF NEW YORK No. 31
 Town Perinton Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>August Christian Stuhmiller</u>	Color <u>White</u>	Name <u>Gloria Esther Arielly</u>	Color <u>White</u>
Residence <u>2886 Clinton Ave Rochester NY</u>	Age <u>23</u> <u>Feb 22 1932</u>	Residence <u>731 Canfield Blvd Fairport NY</u>	Age <u>21</u> <u>Mar 8 1934</u>
Occupation <u>Apprentice pattern maker Pattern</u>	No. of marriage <u>1st</u>	Occupation <u>Teacher - School</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester NY</u>	Former husband or husbands living or dead
Father <u>August Joseph Stuhmiller</u>	Divorced	Father <u>Domenick Armand Arielly</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Florence Wilhelmina Hoff</u>	" where	Mother <u>Eleonor Mary Buffone</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/21/55</u>	(Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Henrietta Road Rochester NY</u> Date <u>6/21/55</u>	(Test completed)
Physician's Statement <u>Erich Jacobsen 10 E. Church St Fairport NY</u> Date <u>6/17/55</u>	(Specimens taken)	Physician's Statement <u>Erich Jacobsen 10 E. Church St Fairport NY</u> Date <u>6/17/55</u>	(Specimens taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>July 9 1955</u> License <u>July 9 1955</u> A.M. Marriage <u>11:53</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>July 14 55</u> License <u>July 14 55</u> A.M. Marriage <u>12:00 P</u>	(Month) (Day) (Year) (Hour)
Official <u>Joe Koenig</u> Profession <u>Catholic Priest</u>	Place of Marriage <u>Fairport NY</u>	Official <u>John Kenneth Steevens 113 Eastnot Wood Rd Rochester NY</u> Profession <u>Catholic Priest</u>	Place of Marriage <u>Fairport NY</u>
Period for solemnization of marriage begins at <u>11:53</u> A.M. on the <u>10th</u> day of <u>July</u> 19 <u>55</u> and ends the <u>27th</u> day of <u>Sept.</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>11:53</u> A.M. on the <u>10th</u> day of <u>July</u> 19 <u>55</u> and ends the <u>27th</u> day of <u>Sept.</u> 19 <u>55</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 32
 Clerk Charlotte Clapp

Mailed to State Dept. Reported to State Com. Health 8/15/55

GROOM

Name William Charles Vier Color white
 Residence 31 1/2 W. Country St. - E. Rochester Age 21 - 6/5/34
 Occupation Let's Queen - Machine Shop No. of marriage 1st
 Birthplace Rochester, N.Y. Former wife or wives living or dead
 Father William James Vier Divorced
 Birthplace U.S. " when
 Mother Rena O. Miller " where
 Birthplace U.S. " against whom

Laboratory Statement Rock Health Bureau Lab. - Rock, N.Y. Date 7/11/55
 Physician's Statement Charles R. Harris - 118 West Ave. - E. Rochester, N.Y. Date 7/8/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____
 Date: Affidavit 7/19/55 License 7/18/55 - 4:29 P.M. Marriage 7/23/55 - 10 A.M. Place of Marriage East Rochester, N.Y.
 Official Anthony F. Calimiri Profession Catholic Priest Witness Donald R. Bier 806 W. Hickory St. - E. Rochester, N.Y.
207 S. Ashfield St. - E. Rochester, N.Y. Witness Mrs. Shirley G. Butler - 6 Varian Lane - Natick, N.Y.
 Period for solemnization of marriage begins at 4:29 P.M. on the 19 day of July 1955 and ends the 17 day of Sept. 1955

BRIDE

Name Mary Caroline Duval Color white
 Residence 122 N. Main St., Fairport, N.Y. Age 18 - 9/12/36
 Occupation Typist - Telephone Co. No. of marriage 1st
 Birthplace Fairport, N.Y. Former husband or husbands living or dead
 Father Stephen Joseph Duval Divorced
 Birthplace U.S. " when
 Mother Caroline Alice King " where
 Birthplace U.S. " against whom

Laboratory Statement Rock Health Bureau Lab. - Rock, N.Y. Date 7/11/55
 Physician's Statement Charles R. Harris - 118 West Ave. - E. Rochester, N.Y. Date 7/8/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____
 Date: Affidavit 7/19/55 License 7/18/55 - 4:29 P.M. Marriage 7/23/55 - 10 A.M. Place of Marriage East Rochester, N.Y.
 Official Anthony F. Calimiri Profession Catholic Priest Witness Donald R. Bier 806 W. Hickory St. - E. Rochester, N.Y.
207 S. Ashfield St. - E. Rochester, N.Y. Witness Mrs. Shirley G. Butler - 6 Varian Lane - Natick, N.Y.
 Period for solemnization of marriage begins at 4:29 P.M. on the 19 day of July 1955 and ends the 17 day of Sept. 1955

Mailed to State Dept. Reported to State Com. Health 8/15/55

City Perinton County Monroe STATE OF NEW YORK No. 33
 Clerk Elizabeth H. Pierce

GROOM

Name Lawrence Howard Haggard Color white
 Residence 88 Dalton Rd., Rochester, N.Y. Age 19 - 5/19/36
 Occupation Maintenance - Photo station No. of marriage 1st
 Birthplace Rochester, N.Y. Former wife or wives living or dead
 Father Howard Bennett Haggard Divorced
 Birthplace U.S. " when
 Mother Catherine Mary Lup " where
 Birthplace U.S. " against whom

Laboratory Statement Rock Health Bureau Lab. - Rock, N.Y. Date 6/30/55
 Physician's Statement John E. Connor - 902 Dewey Ave. - Rock, N.Y. Date 6/29/55
 Examination requirements were not dispensed with by judge or justice
 Consent by Howard B. Haggard Relation Father Date 7/23/55
 Consent by Catherine Haggard Relation Mother Date 7/23/55

Proof of age Certification of Birth
 Date: Affidavit 7/23/55 License 7/23/55 - 11:12 A.M. Marriage 7/26/55 - 7 P.M. Place of Marriage Rochester, N.Y.
 Official John E. Maney Profession Catholic Priest Witness Daniel R. Stricker 141 Alexander St. - Rock, N.Y.
80 Prince St. - Rock, N.Y. Witness Marilyn A. Folwell - 71 Prince St. - Rock, N.Y.
 Period for solemnization of marriage begins at 11:12 A.M. on the 24 day of July 1955 and ends the 22 day of Sept. 1955

BRIDE

Name Frances Elizabeth Folwell Color white
 Residence 71 Prince St. - Rochester, N.Y. Age 16 - 8/12/38
 Occupation at home No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead
 Father George Basil Folwell Divorced
 Birthplace U.S. " when
 Mother Margaret Mary Drury " where
 Birthplace U.S. " against whom

Laboratory Statement Rock Health Bureau Lab. - Rock, N.Y. Date 6/30/55
 Physician's Statement John E. Connor, 902 Dewey Ave., Rock, N.Y. Date 6/29/55
 Examination requirements were not dispensed with by judge or justice
 Consent by George B. Folwell Relation Father Date 7/23/55
 Consent by Margaret M. Folwell Relation Mother Date 7/23/55

Proof of age _____
 Date: Affidavit 7/23/55 License 7/23/55 - 11:12 A.M. Marriage 7/26/55 - 7 P.M. Place of Marriage Rochester, N.Y.
 Official John E. Maney Profession Catholic Priest Witness Daniel R. Stricker 141 Alexander St. - Rock, N.Y.
80 Prince St. - Rock, N.Y. Witness Marilyn A. Folwell - 71 Prince St. - Rock, N.Y.
 Period for solemnization of marriage begins at 11:12 A.M. on the 24 day of July 1955 and ends the 22 day of Sept. 1955

Mailed to State Dept. Reported to State Com. Health 9/5/55

City Perinton County Monroe STATE OF NEW YORK No. 34
 Clerk Elizabeth H. Pierce

GROOM

Name Richard Bernard Fagan Color white
 Residence Sampson Air Force Base Age 20 - 2/23/35
 Occupation U.S. Air Force - Monrovia, N.Y. No. of marriage 1st
 Birthplace Rochester, N.Y. Former wife or wives living or dead
 Father Bernard William Fagan Divorced
 Birthplace U.S. " when
 Mother Emily Anna Krosser " where
 Birthplace U.S. " against whom

Laboratory Statement Clinical Lab. 3650th USAF Hosp. - Sampson AFB, Monrovia, N.Y. Date 7/28/55
 Physician's Statement 3650th USAF Hospital - Sampson AFB, Monrovia, N.Y. Date 7/28/55
 Examination requirements were not dispensed with by judge or justice
 Consent by Bernard W. Fagan Relation Father Date 7/30/55
 Consent by (Mother deceased) Relation _____ Date _____

Proof of age Certification of Birth
 Date: Affidavit 7/30/55 License 7/29/55 - 10:32 A.M. Marriage 8/13/55 - 12 noon Place of Marriage East Rochester, New York
 Official Anthony F. Calimiri Profession Catholic Priest Witness Thomas A. Van Natta 1529 Buffalo Rd. - Perinton, N.Y.
27 S. Ashfield St. - E. Rochester, N.Y. Witness Justine A. Cora, 703 Madison St. - E. Rochester, N.Y.
 Period for solemnization of marriage begins at 10:32 A.M. on the 31st day of July 1955 and ends the 29 day of September 1955

BRIDE

Name Joan Maria Scalise Color white
 Residence 2018 E. Hickory St. - E. Rochester, N.Y. Age 19 - 10/6/35
 Occupation Accountant - Automobile No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead
 Father Thomas Scalise Divorced
 Birthplace Italy " when
 Mother Mary Eva Riccio " where
 Birthplace U.S. " against whom

Laboratory Statement Monrovia Lab. - 435 E. Henrietta Rd. - Rochester, N.Y. Date 7/22/55
 Physician's Statement Jerome N. Amarento, 239 West Ave. - E. Rochester, N.Y. Date 7/18/55
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____
 Date: Affidavit 7/30/55 License 7/29/55 - 10:32 A.M. Marriage 8/13/55 - 12 noon Place of Marriage East Rochester, New York
 Official Anthony F. Calimiri Profession Catholic Priest Witness Thomas A. Van Natta 1529 Buffalo Rd. - Perinton, N.Y.
27 S. Ashfield St. - E. Rochester, N.Y. Witness Justine A. Cora, 703 Madison St. - E. Rochester, N.Y.
 Period for solemnization of marriage begins at 10:32 A.M. on the 31st day of July 1955 and ends the 29 day of September 1955

RECORD OF MARRIAGES

Reported to State
Com. Health 9/1/55
mailed to State Dept of Health
9/15/55

City Perinton County Monroe STATE OF NEW YORK No. 35
 Clerk Edw. H. Pierce

GROOM		BRIDE	
Name <u>Les J. Vane</u>	Color <u>White</u>	Name <u>Marjorie Gene Bushbly</u>	Color <u>White</u>
Residence <u>Moulton, New York</u>	Age <u>26</u> 8/18/29	Residence <u>90 High St., Fairport, NY</u>	Age <u>32</u> 6/25/23
Occupation <u>Tand Heiser Motors</u>	No. of marriage <u>1st</u>	Occupation <u>Waitress, Restaurant</u>	No. of marriage <u>1st</u>
Birthplace <u>Moulton, New York</u>	Former wife or wives living or dead	Birthplace <u>Catletts, N.Y.</u>	Former husband or husbands living or dead
Father <u>John S. Vane</u>	Divorced	Father <u>Andrew Jackson Bushbly</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Emma Cook</u>	" where	Mother <u>Anna Grace Wood</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab., Roch. NY</u> Date <u>7-22-55</u>		Laboratory Statement <u>Rochester Health Bureau Lab., Roch. NY</u> Date <u>7-22-55</u>	
Physician's Statement <u>Zotter Weinberger, 1160 Monroe Ave. Roch. NY</u> Date <u>7-19-55</u>		Physician's Statement <u>Zotter Weinberger, 1160 Monroe Ave. Roch. NY</u> Date <u>7-19-55</u>	
Examination requirements <u>none not</u> dispensed with by judge or justice		Examination requirements <u>none not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug 6, 1955</u> License <u>8-6-55</u> 10:42 A.M. Marriage <u>Aug 13, 1955</u> 11:00 P. Place of Marriage <u>Fairport, New York</u>		Date: Affidavit <u>Aug 6, 1955</u> License <u>8-6-55</u> 10:42 A.M. Marriage <u>Aug 13, 1955</u> 11:00 P. Place of Marriage <u>Fairport, New York</u>	
Official <u>Ray C. Chapman</u> Profession <u>Minister (Roman Catholic)</u> Witness <u>John P. Vane, Moulton, N.Y.</u>		Official <u>Ray C. Chapman</u> Profession <u>Minister (Roman Catholic)</u> Witness <u>John P. Vane, Moulton, N.Y.</u>	
Period for solemnization of marriage begins at <u>12:47 A.M.</u> on the <u>7th</u> day of <u>August</u> 19 <u>55</u> and ends the <u>5th</u> day of <u>October</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>12:47 A.M.</u> on the <u>7th</u> day of <u>August</u> 19 <u>55</u> and ends the <u>5th</u> day of <u>October</u> 19 <u>55</u>	

Reported to State
Com. Health 9/1/55
mailed to State Dept of Health
9/15/55

City Perinton County Monroe STATE OF NEW YORK No. 36
 Clerk Edw. H. Pierce

GROOM		BRIDE	
Name <u>Albert Raymond Anderson</u>	Color <u>White</u>	Name <u>Margaret Jean Bennett</u>	Color <u>White</u>
Residence <u>1220 W. Palmer St. Fairport, N.Y.</u>	Age <u>59</u> 7/2/96	Residence <u>3 Geneva Street, Fairport, NY</u>	Age <u>53</u> 7/22/02
Occupation <u>House Clerk - Electric</u>	No. of marriage <u>3rd</u>	Occupation <u>Mail, Hotel</u>	No. of marriage <u>3rd</u>
Birthplace <u>Chicago, Illinois</u>	Former wife or wives living or dead <u>2nd</u>	Birthplace <u>Geneva, Ill.</u>	Former husband or husbands living or dead <u>none dead</u>
Father <u>Carl Edwin Anderson</u>	Divorced	Father <u>William Oliver Polakowski</u>	Divorced <u>yes</u>
Birthplace <u>Sweden</u>	" when	Birthplace <u>U.S.</u>	" when <u>July 22, 1909</u>
Mother <u>Alice Rosa</u>	" where	Mother <u>Elaine Follin Morry</u>	" where <u>Rochester, Monroe Co. N.Y.</u>
Birthplace <u>Sweden</u>	" against whom	Birthplace <u>U.S.</u>	" against whom <u>Fred C. Bennett</u>
Laboratory Statement <u>Rochester, N.Y. Health Bureau Lab.</u> Date <u>8-9-55</u>		Laboratory Statement <u>Rochester Health Bureau Lab., Roch. NY</u> Date <u>8-9-55</u>	
Physician's Statement <u>John Krasni, Fairport, N.Y.</u> Date <u>8-9-55</u>		Physician's Statement <u>John Krasni, Fairport, N.Y.</u> Date <u>8-9-55</u>	
Examination requirements <u>none not</u> dispensed with by judge or justice		Examination requirements <u>none not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>8-9-55</u> License <u>8-9-55</u> 4:07 P.M. Marriage <u>Aug 13, 1955</u> 5:15 P. Place of Marriage <u>Fairport, New York</u>		Date: Affidavit <u>8-9-55</u> License <u>8-9-55</u> 4:07 P.M. Marriage <u>Aug 13, 1955</u> 5:15 P. Place of Marriage <u>Fairport, New York</u>	
Official <u>James G. Birkhoff</u> Profession <u>Minister (Roman Catholic)</u> Witness <u>Arthur P. Van Ammen, Fairport, N.Y.</u>		Official <u>James G. Birkhoff</u> Profession <u>Minister (Roman Catholic)</u> Witness <u>Arthur P. Van Ammen, Fairport, N.Y.</u>	
Period for solemnization of marriage begins at <u>4:07 P.M.</u> on the <u>10th</u> day of <u>August</u> 19 <u>55</u> and ends the <u>8th</u> day of <u>October</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>4:07 P.M.</u> on the <u>10th</u> day of <u>August</u> 19 <u>55</u> and ends the <u>8th</u> day of <u>October</u> 19 <u>55</u>	

Reported to State
Com. Health 9/1/55
mailed to State Dept of Health
10/15/55

City Perinton County Monroe STATE OF NEW YORK No. 37
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Richard Arthur Clement</u>	Color <u>White</u>	Name <u>Sandra Jean Pappert</u>	Color <u>White</u>
Residence <u>44 Auburn St., Fairport, N.Y.</u>	Age <u>19</u> 11/20/55	Residence <u>53 Bealman Ave., Fairport, NY</u>	Age <u>16</u> 6/23/39
Occupation <u>Labor - Wrecking Co.</u>	No. of marriage <u>1st</u>	Occupation <u>Student</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead
Father <u>Les Newton Clement</u>	Divorced	Father <u>Walter Loung Pappert</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Anty Florence Patricia Walter</u>	" where	Mother <u>Cora Beal Wacker</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Lab., Roch NY</u> Date <u>8-23-55</u>		Laboratory Statement <u>Monroe County Lab., Roch NY</u> Date <u>8-23-55</u>	
Physician's Statement <u>Walter S. Bushbly, 20 W. Church St Fairport, NY</u> Date <u>8-19-55</u>		Physician's Statement <u>Walter S. Bushbly, 20 W. Church St Fairport, NY</u> Date <u>8-19-55</u>	
Examination requirements <u>none not</u> dispensed with by judge or justice		Examination requirements <u>none not</u> dispensed with by judge or justice	
Consent by <u>Les Newton Clement</u> Relation <u>Father</u> Date <u>8-25-55</u>		Consent by <u>Walter Loung Pappert</u> Relation <u>Father</u> Date <u>8-25-55</u>	
Consent by <u>Anty Florence Patricia Clement</u> Relation <u>Mother</u> Date <u>8-25-55</u>		Consent by <u>Cora Beal Pappert</u> Relation <u>Mother</u> Date <u>8-25-55</u>	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>Aug 25, 1955</u> License <u>8-25-55</u> 9:32 A. Marriage <u>Aug 27, 1955</u> 5:00 P. Place of Marriage <u>Fairport, N.Y.</u>		Date: Affidavit <u>Aug 25, 1955</u> License <u>8-25-55</u> 9:32 A. Marriage <u>Aug 27, 1955</u> 5:00 P. Place of Marriage <u>Fairport, N.Y.</u>	
Official <u>Ray C. Chapman</u> Profession <u>Minister (Roman Catholic)</u> Witness <u>Arthur H. Bushbly, Fairport, N.Y.</u>		Official <u>Ray C. Chapman</u> Profession <u>Minister (Roman Catholic)</u> Witness <u>Arthur H. Bushbly, Fairport, N.Y.</u>	
Period for solemnization of marriage begins at <u>9:53 A.M.</u> on the <u>26</u> day of <u>August</u> 19 <u>55</u> and ends the <u>24</u> day of <u>October</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>9:53 A.M.</u> on the <u>26</u> day of <u>August</u> 19 <u>55</u> and ends the <u>24</u> day of <u>October</u> 19 <u>55</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 38
Clerk Charlotte Clapp

Referred to State Health 9/11/55
Mailed to State Health 9/15/55

GROOM		BRIDE	
Name <u>Dean Roy Newcomb</u>	Color <u>White</u>	Name <u>Angela S. Van Dow</u>	Color <u>White</u>
Residence <u>176 W. Main St. Fairport, N.Y.</u>	Age <u>21 6/13/34</u>	Residence <u>Magnolia Rd., Williamson, N.Y.</u>	Age <u>23 8/11/32</u>
Occupation <u>Apprentice Tool Maker - Tool & Die</u>	No. of marriage <u>1st</u>	Occupation <u>Textile - Photographics</u>	No. of marriage <u>1st</u>
Birthplace <u>Providence, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Williamstown, New York</u>	Former husband or husbands living or dead
Father <u>Clarence Herman Newcomb</u>	Divorced	Father <u>Myron L. Van Dow</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>May C. Riland</u>	" where	Mother <u>Sarah Luciezer</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Lab. Rd. N.Y.</u> Date <u>5-19-55</u>	Date <u>5-19-55</u>	Laboratory Statement <u>Monroe County Lab. Rd. N.Y.</u> Date <u>5-19-55</u>	Date <u>5-19-55</u>
Physician's Statement <u>Wickham S. Bickety, 20W Church St. Fairport, N.Y.</u> Date <u>5-17-55</u>	Date <u>5-17-55</u>	Physician's Statement <u>Wickham S. Bickety, 20W Church St. Fairport, N.Y.</u> Date <u>5-17-55</u>	Date <u>5-17-55</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug. 25, 1955</u> License <u>8-25-55 1:22 P.M.</u> Marriage <u>Aug. 28, 1955 2:30 P.M.</u> Place of Marriage <u>Fairport, New York</u>		Date: Affidavit <u>Aug. 25, 1955</u> License <u>8-25-55 1:22 P.M.</u> Marriage <u>Aug. 28, 1955 2:30 P.M.</u> Place of Marriage <u>Fairport, New York</u>	
Official <u>George W. Davis</u> Profession <u>Chaplain</u>		Official <u>George W. Davis</u> Profession <u>Chaplain</u>	
Witness <u>James C. Vanmuden, Fairport, N.Y.</u>		Witness <u>James C. Vanmuden, Fairport, N.Y.</u>	
Period for solemnization of marriage begins at <u>1:22 P.M.</u> on the <u>26</u> day of <u>August</u> 19 <u>55</u> and ends the <u>24</u> day of <u>October</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>1:22 P.M.</u> on the <u>26</u> day of <u>August</u> 19 <u>55</u> and ends the <u>24</u> day of <u>October</u> 19 <u>55</u>	

City Perinton County Monroe STATE OF NEW YORK No. 39
Clerk Charlotte Clapp

Referred to State Com. Health 9/1/55
Mailed to State Health 10/5/55

GROOM		BRIDE	
Name <u>Van Alstyne Wingard</u>	Color <u>White</u>	Name <u>Mary Josephine Corbeil</u>	Color <u>White</u>
Residence <u>115 Westgate Rd. Hammon, N.Y.</u>	Age <u>45 9/5/10</u>	Residence <u>15 Hickins Street Fairport, N.Y.</u>	Age <u>36 10/9/18</u>
Occupation <u>Construction Superintendent</u>	No. of marriage <u>2nd</u>	Occupation <u>Inspector - Factory</u>	No. of marriage <u>2nd</u>
Birthplace <u>Providence, New York</u>	Former wife or wives living or dead <u>living</u>	Birthplace <u>Little Falls, New York</u>	Former husband or husbands living or dead <u>living</u>
Father <u>Henry Everett Wingard</u>	Divorced <u>yes</u>	Father <u>Thomas Grover Corbeil</u>	Divorced <u>yes</u>
Birthplace <u>U.S.</u>	" when <u>10-15-1934</u>	Birthplace <u>Canada</u>	" when <u>10-15-53</u>
Mother <u>Sarah Alida Van Alstyne</u>	" where <u>Canada</u>	Mother <u>Lillian Taylor</u>	" where <u>St. Lawrence Co. New York</u>
Birthplace <u>U.S.</u>	" against whom <u>Madeline Wingard</u>	Birthplace <u>England</u>	" against whom <u>Clifford W. Corbeil</u>
Laboratory Statement <u>State Co. Lab. 2100 City Hall</u> Date <u>5-24-55</u>	Date <u>5-24-55</u>	Laboratory Statement <u>Monroe County Lab. Rd. N.Y.</u> Date <u>Aug 26, 1955</u>	Date <u>Aug 26, 1955</u>
Physician's Statement <u>John R. Hall, 27 Delaware Road, Canisus H.S. N.Y.</u> Date <u>5-22-55</u>	Date <u>5-22-55</u>	Physician's Statement <u>Wickham S. Bickety, 20W Church St. Fairport, N.Y.</u> Date <u>Aug 22, 1955</u>	Date <u>Aug 22, 1955</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug. 27, 1955</u> License <u>8-27-55 10:25 A.M.</u> Marriage <u>9/17/55 5:30 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>		Date: Affidavit <u>Aug. 27, 1955</u> License <u>8-27-55 10:25 A.M.</u> Marriage <u>9/17/55 5:30 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	
Official <u>George W. Davis</u> Profession <u>Chaplain</u>		Official <u>George W. Davis</u> Profession <u>Chaplain</u>	
Witness <u>John Amalie, Thom Home #3, Great Neck, N.Y.</u>		Witness <u>John Amalie, Thom Home #3, Great Neck, N.Y.</u>	
Period for solemnization of marriage begins at <u>10:25 A.M.</u> on the <u>25</u> day of <u>August</u> 19 <u>55</u> and ends the <u>26</u> day of <u>October</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>10:25 A.M.</u> on the <u>25</u> day of <u>August</u> 19 <u>55</u> and ends the <u>26</u> day of <u>October</u> 19 <u>55</u>	

City Perinton County Monroe STATE OF NEW YORK No. 40
Clerk Charlotte Clapp

Referred to State Health 9/1/55
Mailed to State Health 10/5/55

GROOM		BRIDE	
Name <u>Louis Anthony Falcone</u>	Color <u>White</u>	Name <u>Shirley Marie Colabor</u>	Color <u>White</u>
Residence <u>215 Linden Ave., E. Rochester, N.Y.</u>	Age <u>24 (11/4/30)</u>	Residence <u>215 Magnolia St., E. Rochester, N.Y.</u>	Age <u>15 12/9/36</u>
Occupation <u>Carman - Car Shop</u>	No. of marriage <u>1st</u>	Occupation <u>At Home</u>	No. of marriage <u>1st</u>
Birthplace <u>East Rochester, New York</u>	Former wife or wives living or dead	Birthplace <u>East Rochester, New York</u>	Former husband or husbands living or dead
Father <u>Anthony Falcone</u>	Divorced	Father <u>John Colabor</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Marionette Bellucci</u>	" where	Mother <u>Janet Elizabeth Putter</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Lab. Rd. N.Y.</u> Date <u>5-16-55</u>	Date <u>5-16-55</u>	Laboratory Statement <u>Monroe County Lab. Rd. N.Y.</u> Date <u>Aug. 16, 1955</u>	Date <u>Aug. 16, 1955</u>
Physician's Statement <u>Joseph J. Heller, E. Rochester, N.Y.</u> Date <u>5-12-55</u>	Date <u>5-12-55</u>	Physician's Statement <u>Joseph J. Heller, E. Rochester, N.Y.</u> Date <u>Aug. 12, 1955</u>	Date <u>Aug. 12, 1955</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug. 27, 1955</u> License <u>8-27-55 11:44 A.M.</u> Marriage <u>Sept. 3, 1955 9 A.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>		Date: Affidavit <u>Aug. 27, 1955</u> License <u>8-27-55 11:44 A.M.</u> Marriage <u>Sept. 3, 1955 9 A.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>	
Official <u>Rev. P. G. Murphy</u> Profession <u>Catholic Priest</u>		Official <u>Rev. P. G. Murphy</u> Profession <u>Catholic Priest</u>	
Witness <u>James Falcone, E. Rochester, N.Y.</u>		Witness <u>James Falcone, E. Rochester, N.Y.</u>	
Period for solemnization of marriage begins at <u>11:44 A.M.</u> on the <u>25</u> day of <u>August</u> 19 <u>55</u> and ends the <u>26</u> day of <u>October</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>11:44 A.M.</u> on the <u>25</u> day of <u>August</u> 19 <u>55</u> and ends the <u>26</u> day of <u>October</u> 19 <u>55</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 41

Clerk Charlette Clapp

GROOM		BRIDE	
Name <u>Edwin Boydger</u>	Color <u>White</u>	Name <u>Bertina Assina Redman</u>	Color <u>White</u>
Residence <u>50 E. Church St. Fairport, N.Y.</u>	Age <u>44</u> <u>6/9/11</u>	Residence <u>6 South St. Fairport, N.Y.</u>	Age <u>41</u> <u>11/28/13</u>
Occupation <u>Shipping - Mining Equipment</u>	No. of marriage <u>2nd</u>	Occupation <u>At Home</u>	No. of marriage <u>2nd</u>
Birthplace <u>Fairport, New York</u>	Former wife or wives living or dead <u>living</u>	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead <u>living</u>
Father <u>James James Boydger</u>	Divorced <u>yes</u>	Father <u>Ray Smithland Conn</u>	Divorced <u>yes</u>
Birthplace <u>U.S.</u>	" when <u>June 10, 1949</u>	Birthplace <u>U.S.</u>	" when <u>April 6, 1930</u>
Mother <u>Rosa O'Farrell</u>	" where <u>Monroe Co. N.Y.</u>	Mother <u>Lester Elizabeth Conlar</u>	" where <u>Monroe Co. N.Y.</u>
Birthplace <u>U.S.</u>	" against whom <u>Lester M. Boydger</u>	Birthplace <u>U.S.</u>	" against whom <u>Arthur Redman</u>
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>9-2-55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>9-7-55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Wilbur S. Buhety, 20 W. Church St. Fairport, N.Y.</u> Date <u>9-2-55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Wilbur S. Buhety, 20 W. Church St. Fairport, N.Y.</u> Date <u>9-2-55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice	Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 9, 1955</u> License <u>9-9-55 3:42 P.</u> Marriage	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>9/10/55-3:45 P.</u> License <u>9-9-55 3:42 P.</u> Marriage	(Month) (Day) (Year) (Hour) (Hour)
Official <u>Ernest B. Toff</u> Profession <u>Clergyman</u>	Witness <u>Joseph A. Woods - Fairport, N.Y.</u>	Official <u>Ernest B. Toff</u> Profession <u>Clergyman</u>	Witness <u>Joseph A. Woods - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>2:30</u> M. on the <u>10th</u> day of <u>September</u> 19 <u>55</u> and ends the <u>5th</u> day of <u>November</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>2:30</u> M. on the <u>10th</u> day of <u>September</u> 19 <u>55</u> and ends the <u>5th</u> day of <u>November</u> 19 <u>55</u>	

Reported to State Com. Health 10/1/55
mailed to State Dept of Health 10/5/55

City Perinton County Monroe STATE OF NEW YORK No. 42

Clerk Charlette Clapp

GROOM		BRIDE	
Name <u>Jordan Burr Morrison</u>	Color <u>White</u>	Name <u>Flores Marie Jones</u>	Color <u>White</u>
Residence <u>32 Riverside Ave. Fairport, N.Y.</u>	Age <u>20</u> <u>5/27/35</u>	Residence <u>Clyde, N.Y.</u>	Age <u>19</u> <u>4/4/36</u>
Occupation <u>Truck driver - Mfg. Paint</u>	No. of marriage <u>1st</u>	Occupation <u>Waitress - Restaurant</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Lynn, N.Y.</u>	Former husband or husbands living or dead
Father <u>Earl Burr Morrison</u>	Divorced	Father <u>William Henry Jones</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Grace Emma Jones</u>	" where	Mother <u>Debbie Mae Paul</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>N.Y. Dept of Health 110 W. Main St. & Broad, Albany, N.Y.</u> Date <u>8/29/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>N.Y. Dept of Health 110 W. Main St. & Broad, Albany, N.Y.</u> Date <u>8/26/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Bernard F. Rughy, M.D., Clyde, N.Y.</u> Date <u>8/26/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Bernard F. Rughy, M.D., Clyde, N.Y.</u> Date <u>8/26/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice	Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice
Consent by <u>Earl B. Morrison</u> Relation <u>Father</u> Date <u>9/1/55</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Grace E. Morrison</u> Relation <u>Mother</u> Date <u>9/1/55</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>Sept. 10, 1955</u> License <u>9-10-55 10:37 A.</u> Marriage	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>10-1-55 2:15 P.</u> License <u>9-10-55 10:37 A.</u> Marriage	(Month) (Day) (Year) (Hour) (Hour)
Official <u>Arthur E. Mory</u> Profession <u>Minister</u>	Witness <u>Robert J. Moore, Clyde, N.Y.</u>	Official <u>Arthur E. Mory</u> Profession <u>Minister</u>	Witness <u>Robert J. Moore, Clyde, N.Y.</u>
Period for solemnization of marriage begins at <u>10:37 AM</u> on the <u>11th</u> day of <u>September</u> 19 <u>55</u> and ends the <u>9th</u> day of <u>November</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>10:37 AM</u> on the <u>11th</u> day of <u>September</u> 19 <u>55</u> and ends the <u>9th</u> day of <u>November</u> 19 <u>55</u>	

mailed to State Dept of Health 11/5/55

City Perinton County Monroe STATE OF NEW YORK No. 43

Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Carl William Marlett</u>	Color <u>White</u>	Name <u>Stail Ann Steffen</u>	Color <u>White</u>
Residence <u>962 Whitney Rd. Fairport, N.Y.</u>	Age <u>22</u> <u>2/17/33</u>	Residence <u>162 West Ave. - Fairport, N.Y.</u>	Age <u>20</u> <u>8/4/35</u>
Occupation <u>Truck driver - heavy supply</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary - Photographer</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Carl Rowe Marlett</u>	Divorced	Father <u>Allan Louis Steffen</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Artrude Elston Jewett</u>	" where	Mother <u>Florence Bessie Abigail</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>9/16/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>9/16/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Wilbur S. Buhety, 20 W. Church St. Fairport, N.Y.</u> Date <u>9/12/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Wilbur S. Buhety, 20 W. Church St. Fairport, N.Y.</u> Date <u>9/12/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice	Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>9/24/55</u> License <u>9/24/55 11:02 AM</u> Marriage	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>10/11/55-3 P.</u> License <u>9/24/55 11:02 AM</u> Marriage	(Month) (Day) (Year) (Hour) (Hour)
Official <u>Wesley W. Davis</u> Profession <u>Clergyman</u>	Witness <u>Bernard E. Marlett - 227 Seng Rd. - Pittsford, N.Y.</u>	Official <u>Wesley W. Davis</u> Profession <u>Clergyman</u>	Witness <u>Bernard E. Marlett - 227 Seng Rd. - Pittsford, N.Y.</u>
Period for solemnization of marriage begins at <u>11:02 AM</u> on the <u>25</u> day of <u>Sept.</u> 19 <u>55</u> and ends the <u>23</u> day of <u>Nov.</u> 19 <u>55</u>		Period for solemnization of marriage begins at <u>11:02 AM</u> on the <u>25</u> day of <u>Sept.</u> 19 <u>55</u> and ends the <u>23</u> day of <u>Nov.</u> 19 <u>55</u>	

mailed to State Dept of Health 11/5/55

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 44
Clerk Charlette Clapp

GROOM

Name Roger Oliver Holtz Color white
 Residence Macedon, Wayne Co., N.Y. Age 33 - 3/15/22
 Occupation Steam fitter - car shops No. of marriage 1st
 Birthplace Macedon, N.Y. Former wife or wives living or dead
 Father Levia Oliver Holtz Divorced
 Birthplace U.S. " when
 Mother Barbara Ruth Denniston " where
 Birthplace U.S. " against whom
 Laboratory Statement Mon. C. Laboratories, 435 E. Henrietta Rd., Rochester, N.Y. Date 9/23/55 (Test completed)
 Physician's Statement John Kraai, Fairport, N.Y. Date 9/20/55 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 9/29/55 License 9/29/55 4:07 P.M. Marriage 10 - 5 - 55 11 A.M. Place of Marriage Fairport, New York
 Official Walter B. Canning Profession Catholic Priest Witness Anthony Di Rallo, Fairport, N.Y.
 Period for solemnization of marriage begins at 4:07 P.M. on the 30th day of September 1955 and ends the 25th day of November 1955

BRIDE

Name Edith DiStamberardino Color white
 Residence 42 State St., Fairport, N.Y. Age 31 - 10/5/23
 Occupation Assembler, Television & Radio No. of marriage 1st
 Birthplace Fairport, N.Y. Former husband or husbands living or dead
 Father Louis DiStamberardino Divorced
 Birthplace Italy " when
 Mother Maria Nicola D'Augustino " where
 Birthplace Italy " against whom
 Laboratory Statement Mon. C. Laboratories - Rochester, 20, N.Y. Date 9/23/55 (Test completed)
 Physician's Statement John Kraai, Fairport, N.Y. Date 9/20/55 (Specimen taken)
 Examination requirements were not (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1955 and ends the _____ day of _____ 1955

Mailed to State Dept. Reported to State Com. Hallett 10/1/55

City Perinton County Monroe STATE OF NEW YORK No. 45
Clerk Charlette Clapp

GROOM

Name Richard Charles Commins Color white
 Residence 195 Linden Ave., Perinton, N.Y. Age 20 - 5/22/35
 Occupation Machanic Country Club No. of marriage 1st
 Birthplace East Rochester, N.Y. Former wife or wives living or dead
 Father Frank Commins Divorced
 Birthplace U.S. " when
 Mother Alyce Berniella Kane " where
 Birthplace U.S. " against whom
 Laboratory Statement Mon. C. Labs., Rochester 20, N.Y. Date 9/20/55 (Test completed)
 Physician's Statement William S. Roberts, 20 W. Church St., Fairport, N.Y. Date 9/20/55 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice (Were or were not)
 Consent by Frank Commins Relation Father Date 10/4/55
 Consent by Alyce H. Commins Relation Mother Date 10/4/55
 Proof of age Certification of Birth (Form)
 Date: Affidavit 10/4/55 License 10/4/55 2:11 A.M. Marriage 10 - 5 - 55 11 A.M. Place of Marriage Fairport, New York
 Official Walter B. Canning Profession Clergyman Witness Walter H. Stewart, 335 Linden Ave., E. Perinton, N.Y.
 Period for solemnization of marriage begins at 2:11 P.M. on the 5th day of October 1955 and ends the 3rd day of December 1955

BRIDE

Name Rosemary Palermo Color white
 Residence 20 Rockwell Rd., E. Rochester, N.Y. Age 19 7/30/36
 Occupation At Home No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead
 Father Philip Lawrence Palermo Divorced
 Birthplace U.S. " when
 Mother Franz Ruth Hagaman " where
 Birthplace U.S. " against whom
 Laboratory Statement Mon. C. Labs., Rochester 20, N.Y. Date 9/20/55 (Test completed)
 Physician's Statement William S. Roberts, 20 W. Church St., Fairport, N.Y. Date 9/20/55 (Specimen taken)
 Examination requirements were not (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1955 and ends the _____ day of _____ 1955

Mailed to State Dept. Reported to State Com. Hallett 11/1/55

City Perinton County Monroe STATE OF NEW YORK No. 46
Clerk Elysebeth K. Pinner

GROOM

Name Edward Paul O'Brien Color white
 Residence 118 W. Englewood St. Arlington, Va. Age 32 9/28/23
 Occupation Exporting Engineer No. of marriage 1st
 Birthplace Baltimore, Md., U.S. Former wife or wives living or dead
 Father John O'Brien Divorced
 Birthplace U.S. " when
 Mother Katherine Bern " where
 Birthplace U.S. " against whom
 Laboratory Statement Health Dept. of D.C. Date 9/25/55 (Test completed)
 Physician's Statement F. Mearns, M.D., 1535 Eye St. N.W., Washington D.C. Date 9/24/55 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit 10/17/55 License 10/17/55 10:48 P.M. Marriage Oct 22, 1955 11:00 A.M. Place of Marriage East Rochester, N.Y.
 Official Walter B. Canning Profession Catholic Priest Witness Walter Pinner, East Rochester, N.Y.
 Period for solemnization of marriage begins at 11:26 P.M. on the 18th day of October 1955 and ends the 17th day of December 1955

BRIDE

Name Katherine Maria Curran Color white
 Residence 203 Madison St. E. Rochester, N.Y. Age 25 5/23/30
 Occupation Reception Office, U.S. Dept. of State No. of marriage 1st
 Birthplace Rochester, New York Former husband or husbands living or dead
 Father August Curran Divorced
 Birthplace Italy " when
 Mother Evel Louise Mauro " where
 Birthplace U.S. " against whom
 Laboratory Statement Health Dept. of D.C. Date 9/25/55 (Test completed)
 Physician's Statement F. Mearns, M.D., 1535 Eye St. N.W., Washington D.C. Date 9/24/55 (Specimen taken)
 Examination requirements were not (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1955 and ends the _____ day of _____ 1955

Mailed to State Dept. Reported to State Com. Hallett 11/5/55

RECORD OF MARRIAGES

Mailed to State
Reported to State Com.
11/1/55
Health

City Perinton County Monroe STATE OF NEW YORK No. 47
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Joseph Guasina</u>	Color <u>White</u>	Name <u>Margaret Rita Stank</u>	Color <u>White</u>
Residence <u>47 East Ave Fairport NY</u>	Age <u>40 10/2/15</u>	Residence <u>48 East Ave Fairport, New York</u>	Age <u>31 4/9/24</u>
Occupation <u>Machinist - Shop</u>	No. of marriage <u>1st</u>	Occupation <u>Assembler - Shop</u>	No. of marriage <u>2nd</u>
Birthplace <u>Fairport, NY</u>	Former wife or wives living or dead	Birthplace <u>Brooklyn, NY</u>	Former husband or husbands living or dead <u>Living</u>
Father <u>Frank Guasina</u>	Divorced	Father <u>Lawrence Peter Fess</u>	Divorced <u>yes</u>
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when <u>May 22, 1923</u>
Mother <u>Mary Del Pope</u>	" where	Mother <u>Mary Lillian Larson</u>	" where <u>Monroe Co., NY</u>
Birthplace <u>Italy</u>	" against whom	Birthplace <u>England</u>	" against whom <u>William X. Stank</u>
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, NY</u> Date <u>10-18-55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, NY</u> Date <u>10-15-55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>J. N. McEashen, 70 S. Main St. Fairport, NY</u> Date <u>10-14-55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>J. N. McEashen, 70 S. Main St. Fairport, NY</u> Date <u>10-14-55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none</u> (Were or were not) dispensed with by judge or justice		Examination requirements <u>none</u> (Were or were not) dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Oct. 22, 1955</u> License <u>10-22-55 9:36 A.M.</u> Marriage <u>10-29-55 10:00 A.M.</u> Place of Marriage <u>Fairport, New York</u>			
Official: <u>Robert B. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Vito Guasina, 36 Fisher St., Fairport, NY</u>			
Period for solemnization of marriage begins at <u>9:36 A.M.</u> on the <u>23rd</u> day of <u>October</u> 1955 and ends the <u>21st</u> day of <u>December</u> 1955.			

Mailed to State
Reported to State Com.
11/1/55
Health

City Perinton County Monroe STATE OF NEW YORK No. 48
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Ralph Joseph Schwartz</u>	Color <u>White</u>	Name <u>Marie Rose Mendelea</u>	Color <u>White</u>
Residence <u>45 West 13th St. Rochester NY</u>	Age <u>22 8/4/33</u>	Residence <u>135 Cassin Rd., Fairport, NY</u>	Age <u>21 8/8/34</u>
Occupation <u>Mason - Construction</u>	No. of marriage <u>1st</u>	Occupation <u>Office work - Newspaper</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, New York</u>	Former wife or wives living or dead	Birthplace <u>Rochester, New York</u>	Former husband or husbands living or dead
Father <u>Alfred Joseph Schwartz</u>	Divorced	Father <u>Samuel James Mendelea</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Lillian Nelson</u>	" where	Mother <u>Sylvia Marie Nigelli</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau, Rochester, NY</u> Date <u>10-12-55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Rochester Health Bureau, Rochester, NY</u> Date <u>10-13-55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>James P. Gorman, 212 S. Lincoln St. Rochester, NY</u> Date <u>10-12-55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>James P. Gorman, 212 S. Lincoln St. Rochester, NY</u> Date <u>11-12-55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none</u> (Were or were not) dispensed with by judge or justice		Examination requirements <u>none</u> (Were or were not) dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Oct. 22, 1955</u> License <u>10-22-55 9:15 A.M.</u> Marriage <u>10-29-55 10 A.M.</u> Place of Marriage <u>Fairport, New York</u>			
Official: <u>Robert B. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>James C. Bennett, 60 Tyngton St. Rochester, NY</u>			
Period for solemnization of marriage begins at <u>9:15 P.M.</u> on the <u>23rd</u> day of <u>October</u> 1955 and ends the <u>21st</u> day of <u>December</u> 1955.			

Mailed to State
Reported to State Com.
12/1/55
Health

City Perinton County Monroe STATE OF NEW YORK No. 49
 Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Anthony Costanza</u>	Color <u>White</u>	Name <u>Betty Geraldine Degmeyer</u>	Color <u>White</u>
Residence <u>37 Park St., Fairport NY</u>	Age <u>23 6/15/32</u>	Residence <u>29 Alford Pl., Fairport NY</u>	Age <u>19 7/6/36</u>
Occupation <u>Painting - Int. Decorating</u>	No. of marriage <u>2nd</u>	Occupation <u>Waitress - night club</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, New York</u>	Former wife or wives living or dead	Birthplace <u>Sweden, New York</u>	Former husband or husbands living or dead
Father <u>Thomas Costanza</u>	Divorced <u>yes</u>	Father <u>William Gerald Degmeyer</u>	Divorced
Birthplace <u>Italy</u>	" when <u>12/21/154</u>	Birthplace <u>U.S.</u>	" when
Mother <u>Sarah Battaglia</u>	" where <u>Albany Co., NY</u>	Mother <u>Sarahy Winbrenner</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta</u> Date <u>10/11/55</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd., Rochester NY</u> Date <u>10/11/55</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>William S. Beckwith, 20 W. Church St. Fairport, NY</u> Date <u>10/10/55</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>William S. Beckwith, 20 W. Church St. Fairport NY</u> Date <u>10/10/55</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none</u> (Were or were not) dispensed with by judge or justice		Examination requirements <u>none</u> (Were or were not) dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Nov. 7, 1955</u> License <u>11-7-55 2:45 P.</u> Marriage <u>Nov. 18, 1955 8:00 P.</u> Place of Marriage <u>Fairport, New York</u>			
Official: <u>Alvin C. Foster</u> Profession <u>Ordained Minister</u> Witness <u>Betty J. Farnsworth, 15 W. Main St. Fairport NY</u>			
Period for solemnization of marriage begins at <u>2:45 P.M.</u> on the <u>8th</u> day of <u>November</u> 1955 and ends the <u>6th</u> day of <u>January</u> 1956.			

RECORD OF MARRIAGES

City Perinton County Morgan STATE OF NEW YORK No. 50
Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Moan John Vincent</u>	Color <u>White</u>	Name <u>Joanna Santillo</u>	Color <u>White</u>
Residence <u>31 W. Clinton St. E. Rochester NY</u>	Age <u>27</u> 4/2/25	Residence <u>212 S. Lincoln Rd. E. Rochester NY</u>	Age <u>19</u> 6/24/36
Occupation <u>Paul Men - Formica</u>	No. of marriage <u>1st</u>	Occupation <u>Receptionist - Office</u>	No. of marriage <u>1st</u>
Birthplace <u>East Rochester, New York</u>	Former wife or wives living or dead	Birthplace <u>East Rochester, New York</u>	Former husband or husbands living or dead
Father <u>Samuel Vincent</u>	Divorced	Father <u>Rocco Santillo</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Carmela Giovanni</u>	" where	Mother <u>Vincenza Parenti</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Morgan Co. Laboratories 435 E. Henrietta Rd. Rochester NY Date 11/1/55</u>	Date <u>11/1/55</u>	Laboratory Statement <u>Morgan Co. Laboratories 435 E. Henrietta Rd. Rochester NY Date 11/1/55</u>	Date <u>11/1/55</u>
Physician's Statement <u>James J. Kimura 212 S. Lincoln Rd. E. Rochester NY Date 10/25/55</u>	Date <u>10/25/55</u>	Physician's Statement <u>James J. Kimura 212 S. Lincoln Rd. E. Rochester NY Date 10/25/55</u>	Date <u>10/25/55</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Nov. 9, 1955</u> License <u>11/9/55 9:34 A.</u> Marriage <u>11/19/55 12 noon</u>		Date: Affidavit <u>Nov. 9, 1955</u> License <u>11/9/55 9:34 A.</u> Marriage <u>11/19/55 12 noon</u>	
Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>		Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>	
Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>10th</u> day of <u>November</u> 19 <u>55</u> and ends the <u>8th</u> day of <u>January</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>10th</u> day of <u>November</u> 19 <u>55</u> and ends the <u>8th</u> day of <u>January</u> 19 <u>56</u>	

Mailed to State Dept Health 12/5/55

City Perinton County Morgan STATE OF NEW YORK No. 51
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>George Lawrence Metzger</u>	Color <u>White</u>	Name <u>Patricia Ann Stenner</u>	Color <u>White</u>
Residence <u>54 Vernon Rd. Rochester NY</u>	Age <u>19</u> 2/16/36	Residence <u>314 East Elm St. E. Rochester NY</u>	Age <u>19</u> 9/18/36
Occupation <u>Gen. & Service - Delaware</u>	No. of marriage <u>1st</u>	Occupation <u>Office Clerk - Spring & Loan</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester, NY</u>	Former husband or husbands living or dead
Father <u>George Henry Metzger</u>	Divorced	Father <u>Bernard Martin Stenner</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Elizabeth Marie Mandel</u>	" where	Mother <u>Elise Marie Gagne</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Morgan Co. Laboratories 435 E. Henrietta Rd. Rochester NY Date 11/4/55</u>	Date <u>11/4/55</u>	Laboratory Statement <u>Morgan Co. Laboratories 435 E. Henrietta Rd. Rochester NY Date 11/4/55</u>	Date <u>11/4/55</u>
Physician's Statement <u>John Kraus Fairport, NY Date 11/1/55</u>	Date <u>11/1/55</u>	Physician's Statement <u>John Kraus Fairport, NY Date 11/1/55</u>	Date <u>11/1/55</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by <u>Elizabeth M. O'Keefe</u> Relation <u>Mother</u> Date <u>11/14/55</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Father deceased</u> Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Automobile Driver's License</u> (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>11/14/55</u> License <u>11/14/55 5:10 P.</u> Marriage <u>11/24/55 12 noon</u>		Date: Affidavit <u>11/14/55</u> License <u>11/14/55 5:10 P.</u> Marriage <u>11/24/55 12 noon</u>	
Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>		Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>	
Period for solemnization of marriage begins at <u>5:10 P.M.</u> on the <u>18th</u> day of <u>November</u> 19 <u>55</u> and ends the <u>13th</u> day of <u>January</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>5:10 P.M.</u> on the <u>18th</u> day of <u>November</u> 19 <u>55</u> and ends the <u>13th</u> day of <u>January</u> 19 <u>56</u>	

Mailed to State Dept Health 12/5/55

City Perinton County Morgan STATE OF NEW YORK No. 52
Clerk Charlotte Clapp

GROOM		BRIDE	
Name <u>Robert William Orlick</u>	Color <u>White</u>	Name <u>Catherine Anne Sealey</u>	Color <u>White</u>
Residence <u>8 Sweden St. Rochester NY</u>	Age <u>26</u> 7/8/29	Residence <u>11 Brough St. Rochester NY</u>	Age <u>30</u> 9/24/25
Occupation <u>Apprentice printer - Publishing</u>	No. of marriage <u>1st</u>	Occupation <u>Assembly - Factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Mt. Morris, NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester, New York</u>	Former husband or husbands living or dead
Father <u>Rudolph Orlick</u>	Divorced	Father <u>Thomas Joseph Sealey</u>	Divorced
Birthplace <u>Austria</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Lucretia Augusta Mann</u>	" where	Mother <u>Mary Jane Mc Gowan</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab. Rochester NY Date 11/22/55</u>	Date <u>11/22/55</u>	Laboratory Statement <u>Rochester Health Bureau Lab. Rochester NY Date 11/22/55</u>	Date <u>11/22/55</u>
Physician's Statement <u>A.J. Jurgutsky 329 E. Rochester NY Date 11/21/55</u>	Date <u>11/21/55</u>	Physician's Statement <u>A.J. Jurgutsky 329 E. Rochester NY Date 11/21/55</u>	Date <u>11/21/55</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>11/22/55</u> License <u>11/22/55 3:50 P.</u> Marriage <u>11/24/55 4 P.</u>		Date: Affidavit <u>11/22/55</u> License <u>11/22/55 3:50 P.</u> Marriage <u>11/24/55 4 P.</u>	
Official <u>James J. Schmitt</u> Profession <u>Clergyman</u>		Official <u>James J. Schmitt</u> Profession <u>Clergyman</u>	
Period for solemnization of marriage begins at <u>3:50 P.M.</u> on the <u>24th</u> day of <u>November</u> 19 <u>55</u> and ends the <u>22nd</u> day of <u>January</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>3:50 P.M.</u> on the <u>24th</u> day of <u>November</u> 19 <u>55</u> and ends the <u>22nd</u> day of <u>January</u> 19 <u>56</u>	

Mailed to State Dept Health 12/5/55

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 53

Clerk Elizabeth H. Pierce

Mined to State Dept. 11/5/56
Reported to State Com. March 11/5/56

GROOM		BRIDE	
Name <u>George Wyatt Scherer</u>	Color <u>White</u>	Name <u>Lorraine Rose Perinias</u>	Color <u>White</u>
Residence <u>26 Lakeland Park, Rochester, N.Y.</u>	Age <u>27</u> 4/29/28	Residence <u>229 E. Elm St., East Rochester, N.Y.</u>	Age <u>21</u> 7/22/34
Occupation <u>Medical Engineer - Phila. Eng.</u>	No. of marriage <u>1st.</u>	Occupation <u>Secretary - Kodak Company</u>	No. of marriage <u>1st.</u>
Birthplace <u>Philadelphia, Pa.</u>	Former wife or wives living or dead <u>None</u>	Birthplace <u>Brigden, N.Y.</u>	Former husband or husbands living or dead <u>None</u>
Father <u>George Edward Scherer</u>	Divorced	Father <u>Alfred Thomas Perinias</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Brazil</u>	" when
Mother <u>Emily Romanelli</u>	" where	Mother <u>Juditha Emma Cardino</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory <u>Rochester Health Bureau Lab.</u>	Date <u>11/13/55</u>	Laboratory <u>Rochester Health Bureau Lab.</u>	Date <u>11/23/55</u>
Physician's Statement <u>John F. Keegan, 2 Elm St., W. Rochester, N.Y.</u>	Date <u>11/11/55</u>	Physician's Statement <u>John F. Keegan, 2 Elm St., W. Rochester, N.Y.</u>	Date <u>11/11/55</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by <u>George Wyatt Scherer</u>	Relation <u>Self</u> Date	Consent by <u>Lorraine Rose Perinias</u>	Relation <u>Self</u> Date
Consent by <u>George Wyatt Scherer</u>	Relation <u>Self</u> Date	Consent by <u>Lorraine Rose Perinias</u>	Relation <u>Self</u> Date
Proof of age <u>(Form)</u>		Proof of age <u>(Form)</u>	

Date: Affidavit Nov. 26, 1955 License Nov. 26, 1955 10:35 A.M. Marriage December 10, 1955 10 A.M. Place of Marriage East Rochester, N.Y.

Official Ray B. Murphy Profession Catholic Priest Witnesses John F. Keegan, 2 Elm St., W. Rochester, N.Y. Rose M. Vassallo, 153 W. North St. Rochester, N.Y.

Period for solemnization of marriage begins at 12:30 A.M. on the 27 day of November 1955 and ends the 25 day of January 1956

City Perinton County Monroe STATE OF NEW YORK No. 57

Clerk Charlotte Clapp

Mined to State Dept. 11/5/56
Reported to State Com. March 11/5/56

GROOM		BRIDE	
Name <u>Engene Wesley Ellsworth</u>	Color <u>White</u>	Name <u>Rae Ellen Owen</u>	Color <u>White</u>
Residence <u>735 E. Elm St., Fairport, N.Y.</u>	Age <u>19</u> 3/5/36	Residence <u>Windsor Water Rd., Victor, N.Y.</u>	Age <u>19</u> 7/9/36
Occupation <u>Mechanic - U.S. Air Force</u>	No. of marriage <u>1st.</u>	Occupation <u>Chiropractor - Advertising</u>	No. of marriage <u>1st.</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead <u>None</u>	Birthplace <u>Camden, N.Y.</u>	Former husband or husbands living or dead <u>None</u>
Father <u>Forest Fox Ellsworth</u>	Divorced	Father <u>Arthur Allen Owen</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Maie Angeline Williams</u>	" where	Mother <u>Elizabeth Louise Camp</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory <u>Monroe County Laboratory</u>	Date <u>11/18/55</u>	Laboratory <u>Monroe County Laboratory</u>	Date <u>11/15/55</u>
Physician's Statement <u>J. W. McEachern, 70 So. Main St., Fairport, N.Y.</u>	Date <u>11/15/55</u>	Physician's Statement <u>J. W. McEachern, 70 So. Main St., Fairport, N.Y.</u>	Date <u>11/15/55</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by <u>Engene Wesley Ellsworth</u>	Relation <u>Mother</u> Date <u>11/29/55</u>	Consent by <u>Rae Ellen Owen</u>	Relation <u>Self</u> Date
Consent by <u>Forest F. Ellsworth</u>	Relation <u>Father</u> Date <u>11/29/55</u>	Consent by <u>Rae Ellen Owen</u>	Relation <u>Self</u> Date
Proof of age <u>Automobile driver's license</u>		Proof of age <u>Certification of Birth</u>	

Date: Affidavit Nov. 29, 1955 License 11/29/55 10:31 A.M. Marriage Dec. 10, 1955 3:00 P.M. Place of Marriage Rochester, N.Y.

Official Thomas W. Steen Profession Clergyman Witnesses Virginia Marie Casny, 357 Elliott St., Rochester, N.Y.

Period for solemnization of marriage begins at 12:30 A.M. on the 20 day of Nov. 1955 and ends the 28 day of Jan. 1956

City Perinton County Monroe STATE OF NEW YORK No. 55

Clerk Charlotte Clapp

Mined to State Dept. 11/5/56
Reported to State Com. March 11/5/56

GROOM		BRIDE	
Name <u>Gene Franklin Stines</u>	Color <u>White</u>	Name <u>Lois Jean Underhill</u>	Color <u>White</u>
Residence <u>Box 41, Fairport, New York</u>	Age <u>32</u> 5/15/23	Residence <u>20 Putnam St., Rochester, N.Y.</u>	Age <u>27</u> 1/1/25
Occupation <u>Asst. Estimator Eng. Co. Stgo</u>	No. of marriage <u>2nd</u>	Occupation <u>Nurse - American Red Cross</u>	No. of marriage <u>1st.</u>
Birthplace <u>Berwyn, Pa.</u>	Former wife or wives living or dead <u>Dead</u>	Birthplace <u>Wilson, N.Y.</u>	Former husband or husbands living or dead <u>None</u>
Father <u>Grant Isaac Stines</u>	Divorced	Father <u>Archie Leon Underhill</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Nita Marie Fetterof</u>	" where	Mother <u>Floris Wilhelmina Cumberg</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory <u>Rochester Health Bureau Lab.</u>	Date <u>11/25/55</u>	Laboratory <u>Rochester Health Bureau Lab.</u>	Date <u>11/25/55</u>
Physician's Statement <u>Joseph P. Battaglia, 1445 Winton Rd., W. Rochester, N.Y.</u>	Date <u>11/21/55</u>	Physician's Statement <u>Joseph P. Battaglia, 1445 Winton Rd., W. Rochester, N.Y.</u>	Date <u>11/21/55</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by <u>Gene Franklin Stines</u>	Relation <u>Self</u> Date	Consent by <u>Lois Jean Underhill</u>	Relation <u>Self</u> Date
Consent by <u>Gene Franklin Stines</u>	Relation <u>Self</u> Date	Consent by <u>Lois Jean Underhill</u>	Relation <u>Self</u> Date
Proof of age <u>(Form)</u>		Proof of age <u>(Form)</u>	

Date: Affidavit Dec. 3, 1955 License 12/3/55 11:25 A.M. Marriage Dec. 10, 1955 2 P.M. Place of Marriage Westport, N.Y.

Official Joseph P. Underhill Profession Clergyman Witnesses Franklin Stines, Fairport, N.Y. Ernie L. Anderson, Madira, Pa.

Period for solemnization of marriage begins at 11:35 A.M. on the 4 day of December 1955 and ends the 2 day of February 1956

RECORD OF MARRIAGES

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City Perinton County Monroe STATE OF NEW YORK No. 56

Clerk Charlotte Clapp

GROOM

BRIDE

Name Frank Roger Thibodeau 3rd Color White
 Residence 125 Chapel St. Canandaigua Age 19 4-5-36
 Occupation Automobile Sales No. of marriage 1st
 Birthplace Canandaigua, N.Y. Former wife or wives living or dead
 Father Frank Roger Thibodeau Jr. Divorced
 Birthplace U.S. " when
 Mother Gene Agnes Allen " where
 Birthplace U.S. " against whom

Laboratory Statement Stony Mountain Hosp. Lab. Rochester, N.Y. Date 12/22/55
 Physician's Statement C. Harvey Jewett Canandaigua, N.Y. Date 12/20/55
 Examination requirements none not dispensed with by judge or justice
 Consent by Mrs. Janet Boykin Relation Mother Date 12/22/55
 Consent by Father dead Relation Date

Name Janet Lee Gilson Color White
 Residence 173 West Hill Canandaigua, N.Y. Age 17 3-24-38
 Occupation at home No. of marriage 1st
 Birthplace Canandaigua, N.Y. Former husband or husbands living or dead
 Father Herbert Gilson Divorced
 Birthplace U.S. " when
 Mother Elizabeth Virginia Eiseline " where
 Birthplace U.S. " against whom

Laboratory Statement Stony Mountain Hosp. Lab. Rochester, N.Y. Date 12/22/55
 Physician's Statement C. Harvey Jewett Canandaigua, N.Y. Date 12/20/55
 Examination requirements none not (Were or were not) dispensed with by judge or justice
 Consent by Virginia E. Johnson Relation Mother Date 12/22/55
 Consent by Herbert Gilson Relation Date

Proof of age Automobile Driver's License (Form)
 Date: Affidavit Dec. 22, 1955 License 12-22-55 4:06 P. Marriage Dec. 26, 1955 4 P. M. Place of Marriage Clyde, New York
 Official Henry Hunt Clyde, N.Y. Profession Clayman Witness Mrs. Harold S. Braden, Clyde, N.Y.
 Period for solemnization of marriage begins at 4:06 P.M. on the 23 day of December 1955 and ends the 21 day of February 1956

City Perinton County Monroe STATE OF NEW YORK No. 57

Clerk Elizabeth H. Pearce

GROOM

BRIDE

Name William Franklin Robinson, Jr. Color White
 Residence 1215 E. Main St., Virginia Age 19 5-23-36
 Occupation U.S. Air Force No. of marriage 1st
 Birthplace Rocky Mount, Virginia Former wife or wives living or dead
 Father William Franklin Robinson Divorced
 Birthplace U.S. " when
 Mother Cecil Paul " where
 Birthplace U.S. " against whom

Laboratory Statement Parke AFB California Date 12/5/55
 Physician's Statement Dr. S. G. Smith Rocky Mount, N.Y. Date 12/5/55
 Examination requirements none not dispensed with by judge or justice
 Consent by Cecil S. Robinson Relation Mother Date 12/5/55
 Consent by William F. Robinson Relation Father Date 12/5/55

Name Joan Van Horn Color White
 Residence 12 Suffolk St. Fairport, N.Y. Age 17 12/11/38
 Occupation Assembly - Factory No. of marriage 1st
 Birthplace West Nyack, N.Y. Former husband or husbands living or dead
 Father Henry Franklin Van Horn Divorced
 Birthplace U.S. " when
 Mother Fluorence Bernice Muehler " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Laboratories 435 E. Henrietta St. Rochester 20, N.Y. Date 12/14/55
 Physician's Statement William S. Baskin 20 W. Church St. Fairport, N.Y. Date 12/13/55
 Examination requirements none not (Were or were not) dispensed with by judge or justice
 Consent by Fluorence B. Van Horn Relation Mother Date 12/23/55
 Consent by Henry F. Van Horn Relation Father Date 12/23/55
 Consent by D. J. O'Mara Relation Date

Proof of age Automobile Driver's License (Form)
 Date: Affidavit Dec. 23, 1955 License 12-23-55 12:30 P. Marriage Dec. 23, 1955 2:30 P. Place of Marriage Fairport, N.Y.
 Official Donald G. Behrman P.O. 42 Canal St. Fairport, N.Y. Profession Clayman Witness Joan Van Horn, Fairport, N.Y.
 Period for solemnization of marriage begins at 12:30 P.M. on the 23 day of December 1955 and ends the 21 day of February 1956

City Perinton County Monroe STATE OF NEW YORK No. 58

Clerk Charlotte Clapp

GROOM

BRIDE

Name Thomas Dickson Costanza Color White
 Residence 37 Park St. Fairport, N.Y. Age 19 2/15/36
 Occupation U.S. Army No. of marriage 1st
 Birthplace Fairport, N.Y. Former wife or wives living or dead
 Father Thomas Costanza Divorced
 Birthplace Italy " when
 Mother Sarah Butaglia " where
 Birthplace Italy " against whom

Laboratory Statement U.S. Army Hospital C.P. Chappaqua, N.Y. Date 12/18/55
 Physician's Statement U.S. Army Hospital C.P. Chappaqua, N.Y. Date 12/18/55
 Examination requirements none not dispensed with by judge or justice
 Consent by Sarah Costanza Relation Mother Date 12/24/55
 Consent by Thomas Costanza Relation Father Date 12/24/55

Name Nancy Caroline Lewis Color White
 Residence 87 Beaulieu Ave, Fairport, N.Y. Age 18 10/29/37
 Occupation Clerk - Insurance No. of marriage 1st
 Birthplace Fairport, N.Y. Former husband or husbands living or dead
 Father James Bryan Lewis Divorced
 Birthplace U.S. " when
 Mother Norma Park " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe Co. Labs. 435 E. Henrietta St. Rochester 20, N.Y. Date 12/14/55
 Physician's Statement Dr. S. Baskin 270 S. Main St. Fairport, N.Y. Date 12/14/55
 Examination requirements none not (Were or were not) dispensed with by judge or justice
 Consent by Nancy Lewis Relation Date
 Consent by James Lewis Relation Date

Proof of age Birth record (Form)
 Date: Affidavit 12-24-55 License 12-24-55 11:59 P. Marriage Dec. 29, 1955 10 A.M. Place of Marriage Fairport, N.Y.
 Official Edward A. Kelly 102 East Ave Fairport, N.Y. Profession Catholic Priest Witness Patricia Anne Garrison, 30 Fishkill St. Fairport, N.Y.
 Period for solemnization of marriage begins at 10:59 P.M. on the 25 day of December 1955 and ends the 23 day of February 1956

Mined to State Dept. Reports to State Com. 11/1/56
 Mined to State Dept. Reports to State Com. 11/1/56
 Mined to State Dept. Reports to State Com. 11/1/56
 Mined to State Dept. Reports to State Com. 11/1/56

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 1
 Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Robert Lee Spangler</u> (Full name)	Color <u>White</u>	Name <u>Jacqueline Helen Mc Namara</u> (Full name)	Color <u>White</u>
Residence <u>230 West River Drive Buffalo, N.Y.</u>	Age <u>24</u> <u>2/21/31</u>	Residence <u>2154 Birch St., Fairport, N.Y.</u>	Age <u>19</u> <u>4/2/36</u>
Occupation <u>Student - Bridge</u>	No. of marriage <u>1st</u>	Occupation <u>Registered Retail Store</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Perinton, N.Y.</u>	Former husband or husbands living or dead
Father <u>Cyril Luther Spangler</u> (Name of)	Divorced	Father <u>William Ames Mc Namara</u> (Name of)	Divorced
Birthplace <u>Perinton, N.Y.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Jean Helen Beach</u> (Maiden name of)	" where	Mother <u>Elizabeth Lind</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories, Dept. of Health 265 Deane Ave., Syracuse, N.Y.</u> Date <u>1-11-56</u>	(Test completed)	Laboratory Statement <u>Perinton Health Bureau Lab. Perinton, N.Y.</u> Date <u>1-11-56</u>	(Test completed)
Physician's Statement <u>Charles E. Beck, Perinton, N.Y.</u> Date <u>1-10-56</u>	(Specimen taken)	Physician's Statement <u>Julius Beck 171 Park Ave., Perinton, N.Y.</u> Date <u>1-9-56</u>	(Specimen taken)
Examination requirements <u>none met</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>none met</u> (Were or were not)	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Jan 18, 1956</u> License <u>Jan 18, 1956 5:05 P.M.</u> Marriage <u>Jan 19, 1956 5:30 P.M.</u> Place of Marriage <u>Perinton, N.Y.</u>		Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	
Official <u>John Selwyn Mynick, 209 Seneca St., Perinton, N.Y.</u> Profession <u>Clergyman</u>		Official _____ Profession _____	
Witness <u>Frank E. Morris, Perinton, N.Y.</u>		Witness _____	
Period for solemnization of marriage begins at <u>5:05 P.M.</u> on the <u>19</u> day of <u>January</u> 19 <u>56</u> and ends the <u>17</u> day of <u>March</u> 19 <u>56</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u>	

Mined to State Dept. Reported to State Com. 2/14/56

City Perinton County Monroe STATE OF NEW YORK No. 2
 Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Robert Louis Macaulay</u> (Full name)	Color <u>White</u>	Name <u>Mary Calabrese</u> (Full name)	Color <u>White</u>
Residence <u>240 West Ave., E. Perinton, N.Y.</u>	Age <u>22</u> <u>12/30/32</u>	Residence <u>111 W. Elm St., E. Perinton, N.Y.</u>	Age <u>22</u> <u>8/22/33</u>
Occupation <u>Auditor - Government</u>	No. of marriage <u>1st</u>	Occupation <u>Clerk - Retail Store</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>East Perinton, N.Y.</u>	Former husband or husbands living or dead
Father <u>James Macaulay</u> (Name of)	Divorced	Father <u>John Calabrese</u> (Name of)	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Louise Tardo</u> (Maiden name of)	" where	Mother <u>Maria Scarpone</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories 435 E. Main St., Perinton, N.Y.</u> Date <u>Jan 14, 1956</u>	(Test completed)	Laboratory Statement <u>Monroe Co. Laboratories 435 E. Main St., Perinton, N.Y.</u> Date <u>Jan 10, 1956</u>	(Test completed)
Physician's Statement <u>James N. Ginnanti, 212 S. Seneca St., E. Perinton, N.Y.</u> Date <u>Jan 6, 1956</u>	(Specimen taken)	Physician's Statement <u>James N. Ginnanti, 212 S. Seneca St., E. Perinton, N.Y.</u> Date <u>Jan 6, 1956</u>	(Specimen taken)
Examination requirements <u>none met</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>none met</u> (Were or were not)	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Jan 20, 1956</u> License <u>1-20-1956 12:54 P.M.</u> Marriage <u>Jan 28, 1956 10 A.M.</u> Place of Marriage <u>East Perinton, N.Y.</u>		Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	
Official <u>Frank E. Morris, 209 Seneca St., Perinton, N.Y.</u> Profession <u>Catholic Priest</u>		Official _____ Profession _____	
Witness <u>Belmonte, 514 West Ave., E. Perinton, N.Y.</u>		Witness _____	
Period for solemnization of marriage begins at <u>12:54 P.M.</u> on the <u>21st</u> day of <u>January</u> 19 <u>56</u> and ends the <u>19</u> day of <u>March</u> 19 <u>56</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u>	

Mined to State Dept. Reported to State Com. 2/14/56

City Perinton County Monroe STATE OF NEW YORK No. 3
 Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Paul Warren Griff</u> (Full name)	Color <u>White</u>	Name <u>Bartholomew James Buehler</u> (Full name)	Color <u>White</u>
Residence <u>22 West St., Perinton, N.Y.</u>	Age <u>26</u> <u>10/10/29</u>	Residence <u>55 Bridge St., Perinton, N.Y.</u>	Age <u>22</u> <u>7/12/33</u>
Occupation <u>Fisherman - City of Perinton</u>	No. of marriage <u>1st</u>	Occupation <u>Registered - Retail Store</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Perinton, N.Y.</u>	Former husband or husbands living or dead
Father <u>Paul Thomas Griff</u> (Name of)	Divorced	Father <u>John Abraham Buehler</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Belmont</u>	" when
Mother <u>Louise Mae Brown</u> (Maiden name of)	" where	Mother <u>Mary Agnes Muller</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Perinton Health Bureau Lab. Perinton, N.Y.</u> Date <u>1-26-56</u>	(Test completed)	Laboratory Statement <u>Perinton Health Bureau Lab. Perinton, N.Y.</u> Date <u>1-26-56</u>	(Test completed)
Physician's Statement <u>John P. Schreiber, 260 Amstel Blvd., Perinton, N.Y.</u> Date <u>1-23-56</u>	(Specimen taken)	Physician's Statement <u>John P. Schreiber, 260 Amstel Blvd., Perinton, N.Y.</u> Date <u>1-23-56</u>	(Specimen taken)
Examination requirements <u>none met</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>none met</u> (Were or were not)	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Feb. 9, 1956</u> License <u>2-9-56 2:44 P.M.</u> Marriage <u>Feb. 22, 1956 8 P.M.</u> Place of Marriage <u>Greene, N.Y.</u>		Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	
Official <u>Frank Robinson, 2720 Henry Ave., Perinton, N.Y.</u> Profession <u>Justice of Peace</u>		Official _____ Profession _____	
Witness <u>Carl R. Hillert, 132 Haven Ave., Perinton, N.Y.</u>		Witness _____	
Period for solemnization of marriage begins at <u>2:44 P.M.</u> on the <u>10</u> day of <u>February</u> 19 <u>56</u> and ends the <u>8</u> day of <u>April</u> 19 <u>56</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u>	

Mined to State Dept. Reported to State Com. 3/5/56

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 4
 Clerk Elizabeth H. Pearce

GROOM		BRIDE	
Name <u>Nicholas Leo Ingiammi</u>	Color <u>White</u>	Name <u>Nancy Ann Lowridge</u>	Color <u>White</u>
Residence <u>875 W. Highway Rd. Fairport, N.Y.</u>	Age <u>24</u> <u>6/14/31</u>	Residence <u>485 Oxford St. Rochester, N.Y.</u>	Age <u>24</u> <u>11/27/31</u>
Occupation <u>Laborer - Penn. Milk</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary - Law Office</u>	No. of marriage <u>1st</u>
Birthplace <u>Columbus, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>James Ingiammi</u>	Divorced	Father <u>James Owen Lowridge</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Elizabeth Lucille Rhinwell</u>	" where	Mother <u>Marie Margaret Holden</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratory 435 E. Henrietta Rd. Rochester, N.Y. Date 2-18-56</u>	Date <u>2-18-56</u>	Laboratory Statement <u>Rochester Health Bureau Rochester, N.Y. Date 2-13-56</u>	Date <u>2-13-56</u>
Physician's Statement <u>Dr. Robert J. Fairport, N.Y. Date 2-18-56</u>	Date <u>2-18-56</u>	Physician's Statement <u>E. J. Smith 133 Clinton Ave. S. Rochester, N.Y. Date 2-5-56</u>	Date <u>2-5-56</u>
Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice	Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Feb. 14, 1956</u> License <u>3-9-56</u> M. Marriage <u>4:26 P.</u> Place of Marriage _____		Date: Affidavit _____ License _____ M. Marriage _____ Place of Marriage _____	
Official _____ Profession _____		Official _____ Profession _____	
Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u> .		Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u> .	

Reported to State Com. March 3/1/56

City Perinton County Monroe STATE OF NEW YORK No. 5
 Clerk Elizabeth H. Pearce

GROOM		BRIDE	
Name <u>James Diaz</u>	Color <u>White</u>	Name <u>Enayra Marie Collins</u>	Color <u>White</u>
Residence <u>243 Gullway St. Rochester, N.Y.</u>	Age <u>22</u> <u>10/2/33</u>	Residence <u>243 Gullway St. Rochester, N.Y.</u>	Age <u>21</u> <u>3/9/35</u>
Occupation <u>John B. Baker</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Angelina, California</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>James Diaz</u>	Divorced	Father <u>Friedrich James Collins</u>	Divorced
Birthplace <u>Mexico</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Julia Maria</u>	" where	Mother <u>Gertrude Louise Tuelka</u>	" where
Birthplace <u>Mexico</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Rochester, N.Y. Date Mar. 7, 1956</u>	Date <u>Mar. 7, 1956</u>	Laboratory Statement <u>Rochester Health Bureau Rochester, N.Y. Date March 7, 1956</u>	Date <u>March 7, 1956</u>
Physician's Statement <u>Dr. F. Bonaventura 1771 Culver Rd. Rochester, N.Y. Date Mar. 5, 1956</u>	Date <u>Mar. 5, 1956</u>	Physician's Statement <u>Dr. F. Bonaventura 1771 Culver Rd. Rochester, N.Y. Date March 5, 1956</u>	Date <u>March 5, 1956</u>
Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice	Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>March 9, 1956</u> License <u>3-9-56</u> M. Marriage <u>4:26 P.</u> Place of Marriage <u>Perinton</u>		Date: Affidavit _____ License _____ M. Marriage _____ Place of Marriage _____	
Official <u>James G. Brown</u> Profession <u>Judge of the Peace</u>		Official <u>Isabel T. Enright</u> Profession <u>Justice of the Peace</u>	
Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u> .		Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u> .	

Reported to State Com. March 4/1/56

City Perinton County Monroe STATE OF NEW YORK No. 6
 Clerk Elizabeth H. Pearce

GROOM		BRIDE	
Name <u>William Bloom</u>	Color <u>White</u>	Name <u>Carolyn Joyce Payne</u>	Color <u>White</u>
Residence <u>25 East Blvd Rochester, N.Y.</u>	Age <u>26</u> <u>5/13/29</u>	Residence <u>11 Cole Street, Fairport, N.Y.</u>	Age <u>21</u> <u>7/6/34</u>
Occupation <u>Production - Kodak</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary - Rochester Gas & Elec. Corp.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, New York</u>	Former wife or wives living or dead	Birthplace <u>Fairport, New York</u>	Former husband or husbands living or dead
Father <u>Benjamin Bloom</u>	Divorced	Father <u>Benjamin Alfred Payne</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Blossie Goldmann</u>	" where	Mother <u>Esther Mae Baker</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratory 435 E. Henrietta Rd. Rochester, N.Y. Date Feb. 24, 1956</u>	Date <u>Feb. 24, 1956</u>	Laboratory Statement <u>Monroe Co. Lab 435 E. Henrietta Rd. Rochester, N.Y. Date Feb. 24, 1956</u>	Date <u>Feb. 24, 1956</u>
Physician's Statement <u>H.P. Marlett 82 West 87th St. Fairport, N.Y. Date Feb. 20, 1956</u>	Date <u>Feb. 20, 1956</u>	Physician's Statement <u>H.P. Marlett 82 West 87th St. Fairport, N.Y. Date Feb. 20, 1956</u>	Date <u>Feb. 20, 1956</u>
Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice	Examination requirements <u>none met</u>	(Were or were not) dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Mar. 9, 1956</u> License <u>3-9-56</u> M. Marriage <u>4:44 P.</u> Place of Marriage <u>Cornwall, N.Y.</u>		Date: Affidavit _____ License _____ M. Marriage _____ Place of Marriage _____	
Official <u>George Carmele</u> Profession <u>Deputy Minister</u>		Official <u>Gene Anderson</u> Profession <u>Justice of the Peace</u>	
Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u> .		Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u> .	

Reported to State Com. March 4/1/56

Reported to State Com. March 4/1/56

RECORD OF MARRIAGES

Mailed to State Dept. Reported to State Com. 4/1/56
Mailed to State Dept. Reported to State Com. 4/1/56
Mailed to State Dept. Reported to State Com. 4/1/56
Mailed to State Dept. Reported to State Com. 4/1/56

City Perinton County Monroe STATE OF NEW YORK No. 7
 Deputy Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>Robert Lee Clement</u> <small>(Full name)</small>	Color <u>White</u>	Name <u>Catharine Ann McKay</u> <small>(Full name)</small>	Color <u>White</u>
Residence <u>44 Oakton Rd. Fairport, N.Y.</u>	Age <u>23</u> <u>4/1/32</u>	Residence <u>8 Florence St., Auburn, N.Y.</u>	Age <u>19</u> <u>7/4/36</u>
Occupation <u>Truck Driver - Working Co.</u>	No. of marriage <u>1st</u>	Occupation <u>At Home</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Perinton, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Joe Newton Clement</u> <small>(Name of)</small>	Divorced	Father <u>Donald Frederick McKay</u> <small>(Name of)</small>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Rosemary Florence Bernice Weston</u> <small>(Maiden name of)</small>	" where	Mother <u>Ruth Bannan Day</u> <small>(Maiden name of)</small>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory <u>Monroe Co. Lab.</u> Statement <u>435 E. Henrietta Rd. Perinton, N.Y.</u> Date <u>3/13/56</u>	<small>(Name and address of laboratory)</small> <small>(Test completed)</small>	Laboratory <u>Monroe Co. Lab.</u> Statement <u>435 E. Henrietta Rd. Perinton, N.Y.</u> Date <u>3/13/56</u>	<small>(Name and address of laboratory)</small> <small>(Test completed)</small>
Physician's Statement <u>William S. Roberts, 20 W. Church St. Fairport, N.Y.</u> Date <u>3/13/56</u>	<small>(Name and address of physician)</small> <small>(Specimen taken)</small>	Physician's Statement <u>William S. Roberts, 20 W. Church St. Fairport, N.Y.</u> Date <u>3/13/56</u>	<small>(Name and address of physician)</small> <small>(Specimen taken)</small>
Examination requirements <u>none met</u> dispensed with by judge or justice	<small>(Were or were not)</small>	Examination requirements <u>none met</u> dispensed with by judge or justice	<small>(Were or were not)</small>
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ <small>(Form)</small>		Proof of age _____ <small>(Form)</small>	
Date: Affidavit <u>Mar. 20, 1956</u> License <u>3-20-56 2:07 P.M.</u> Marriage <u>March 24, 1956 7:30 P.M.</u> Place of Marriage <u>Fairport, New York</u>	<small>(Month) (Day) (Year) (Hour)</small>	Date: Affidavit <u>Mar. 20, 1956</u> License <u>3-20-56 2:07 P.M.</u> Marriage <u>March 24, 1956 7:30 P.M.</u> Place of Marriage <u>Fairport, New York</u>	<small>(Month) (Day) (Year) (Hour)</small>
Official <u>George M. W. Davis</u> Profession <u>Clergyman</u>		Official <u>Ann S. Buechel, 36 Courtland Blvd. Perinton, N.Y.</u> Witness <u>Charlesman S. Buechel, 36 Courtland Blvd. Perinton, N.Y.</u>	
Period for solemnization of marriage begins at <u>2:07 P.M.</u> on the <u>21st</u> day of <u>March</u> 19 <u>56</u> and ends the <u>19th</u> day of <u>May</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>2:07 P.M.</u> on the <u>21st</u> day of <u>March</u> 19 <u>56</u> and ends the <u>19th</u> day of <u>May</u> 19 <u>56</u>	

City Perinton County Monroe STATE OF NEW YORK No. 8
 Deputy Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>David Andrew Helbert</u> <small>(Full name)</small>	Color <u>White</u>	Name <u>Carolyn Anne Liel</u> <small>(Full name)</small>	Color <u>White</u>
Residence <u>9 Fifth Ave. Fairport, N.Y.</u>	Age <u>23</u> <u>3/19/33</u>	Residence <u>9 Fifth Ave. Fairport, N.Y.</u>	Age <u>23</u> <u>3/19/33</u>
Occupation <u>Service Man</u> <u>USN</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary, Chamber of Commerce</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Perinton, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Harold Edward Helbert</u> <small>(Name of)</small>	Divorced	Father <u>Freud Liel</u> <small>(Name of)</small>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Germany</u>	" when
Mother <u>Mary Louise Andrews</u> <small>(Maiden name of)</small>	" where	Mother <u>Elizabeth Ellen Dennis</u> <small>(Maiden name of)</small>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory <u>Monroe Co. Laboratory</u> Statement <u>435 E. Henrietta Rd. Perinton, N.Y.</u> Date <u>3-16-56</u>	<small>(Name and address of laboratory)</small> <small>(Test completed)</small>	Laboratory <u>Monroe Co. Laboratory</u> Statement <u>435 E. Henrietta Rd. Perinton, N.Y.</u> Date <u>3-16-56</u>	<small>(Name and address of laboratory)</small> <small>(Test completed)</small>
Physician's Statement <u>William S. Roberts, 20 W. Church St. Fairport, N.Y.</u> Date <u>3-14-56</u>	<small>(Name and address of physician)</small> <small>(Specimen taken)</small>	Physician's Statement <u>William S. Roberts, 20 W. Church St. Fairport, N.Y.</u> Date <u>3-14-56</u>	<small>(Name and address of physician)</small> <small>(Specimen taken)</small>
Examination requirements <u>none met</u> dispensed with by judge or justice	<small>(Were or were not)</small>	Examination requirements <u>none met</u> dispensed with by judge or justice	<small>(Were or were not)</small>
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ <small>(Form)</small>		Proof of age _____ <small>(Form)</small>	
Date: Affidavit <u>March 24, 1956</u> License <u>Mar. 24, 1956 9:17 A.M.</u> Marriage <u>April 7, 1956 7:00 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	<small>(Month) (Day) (Year) (Hour)</small>	Date: Affidavit <u>March 24, 1956</u> License <u>Mar. 24, 1956 9:17 A.M.</u> Marriage <u>April 7, 1956 7:00 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	<small>(Month) (Day) (Year) (Hour)</small>
Official <u>Arvin G. Foster</u> Profession <u>ordained clergyman</u>		Official <u>Arvin G. Foster</u> Profession <u>ordained clergyman</u> Witness <u>Carolyn M. Helbert, 9500 E. Fairport, N.Y.</u>	
Period for solemnization of marriage begins at <u>9:17 A.M.</u> on the <u>25</u> day of <u>March</u> 19 <u>56</u> and ends the <u>23</u> day of <u>May</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>9:17 A.M.</u> on the <u>25</u> day of <u>March</u> 19 <u>56</u> and ends the <u>23</u> day of <u>May</u> 19 <u>56</u>	

City Perinton County Monroe STATE OF NEW YORK No. 9
 Deputy Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>Norman George Cannito</u> <small>(Full name)</small>	Color <u>White</u>	Name <u>Margie Ann Kier</u> <small>(Full name)</small>	Color <u>White</u>
Residence <u>26 Hubbard St. Fairport, N.Y.</u>	Age <u>17</u> <u>2-21-39</u>	Residence <u>125 E. Maple St., E. Perinton, N.Y.</u>	Age <u>16</u> <u>5-6-1939</u>
Occupation <u>Farm Work - Farming</u>	No. of marriage <u>1st</u>	Occupation <u>At Home</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Perinton, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Garfield F. Cannito</u> <small>(Name of)</small>	Divorced	Father <u>George John Kier</u> <small>(Name of)</small>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Ida Mae Duceen</u> <small>(Maiden name of)</small>	" where	Mother <u>Margaret Louise Cuk</u> <small>(Maiden name of)</small>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory <u>Monroe County Laboratory</u> Statement <u>435 E. Henrietta Rd. Perinton, N.Y.</u> Date <u>3-23-56</u>	<small>(Name and address of laboratory)</small> <small>(Test completed)</small>	Laboratory <u>Monroe County Laboratory</u> Statement <u>435 E. Henrietta Rd. Perinton, N.Y.</u> Date <u>3-23-56</u>	<small>(Name and address of laboratory)</small> <small>(Test completed)</small>
Physician's Statement <u>John Brian Fairport, N.Y.</u> Date <u>3-20-56</u>	<small>(Name and address of physician)</small> <small>(Specimen taken)</small>	Physician's Statement <u>John Brian Fairport, N.Y.</u> Date <u>3-20-56</u>	<small>(Name and address of physician)</small> <small>(Specimen taken)</small>
Examination requirements <u>none met</u> dispensed with by judge or justice	<small>(Were or were not)</small>	Examination requirements <u>none met</u> dispensed with by judge or justice	<small>(Were or were not)</small>
Consent by <u>Garfield F. Cannito</u> Relation <u>Father</u> Date <u>3-27-56</u>		Consent by <u>George John Kier</u> Relation <u>Father</u> Date <u>3-27-56</u>	
Consent by <u>Ida Mae Cannito</u> Relation <u>Mother</u> Date <u>3-27-56</u>		Consent by <u>Margaret Louise Kier</u> Relation <u>Mother</u> Date <u>3-27-56</u>	
Proof of age <u>Professional record</u> <small>(Form)</small>		Proof of age <u>Professional record</u> <small>(Form)</small>	
Date: Affidavit <u>March 27, 1956</u> License <u>3-27-56 2:29 P.M.</u> Marriage <u>Mar. 29, 1956 9:30 P.M.</u> Place of Marriage <u>East Perinton, N.Y.</u>	<small>(Month) (Day) (Year) (Hour)</small>	Date: Affidavit <u>March 27, 1956</u> License <u>3-27-56 2:29 P.M.</u> Marriage <u>Mar. 29, 1956 9:30 P.M.</u> Place of Marriage <u>East Perinton, N.Y.</u>	<small>(Month) (Day) (Year) (Hour)</small>
Official <u>William C. Ahlrich</u> Profession <u>Clergyman</u>		Official <u>William C. Ahlrich</u> Profession <u>Clergyman</u> Witness <u>Margie Ann Kier, 210 E. Commercial St. E. Perinton, N.Y.</u>	
Period for solemnization of marriage begins at <u>2:29 P.M.</u> on the <u>25</u> day of <u>March</u> 19 <u>56</u> and ends the <u>26</u> day of <u>May</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>2:29 P.M.</u> on the <u>25</u> day of <u>March</u> 19 <u>56</u> and ends the <u>26</u> day of <u>May</u> 19 <u>56</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 10
 Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>John Edward Preece</u> (Full name)	Color <u>White</u>	Name <u>Jean Agnes Berlin</u> (Full name)	Color <u>White</u>
Residence <u>Macedon N.Y.</u>	Age <u>20</u> 2-18-36	Residence <u>105 W. Columbus St. E. Rochester, N.Y.</u>	Age <u>20</u> 9-26-35
Occupation <u>Truck Driver - Contractor</u>	No. of marriage <u>1st</u>	Occupation <u>Machine Worker - Box Factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead
Father <u>William Edward Preece</u> (Name of)	Divorced	Father <u>Robert John Berlin</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Minnie Marie Fuda Preece</u> (Maiden name of)	" where	Mother <u>Iva May Reily</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratory</u> (Name and address of laboratory)	Date <u>3-9-56</u>	Laboratory Statement <u>Monroe County Laboratory</u> (Name and address of laboratory)	Date <u>3-9-56</u>
Physician's Statement <u>John Kraai, Fairport, N.Y.</u> (Name and address of physician)	Date <u>3-6-56</u>	Physician's Statement <u>John Kraai, Fairport, N.Y.</u> (Name and address of physician)	Date <u>3-6-56</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by <u>William E. Preece</u> Relation <u>Father</u> Date <u>3-29-56</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Mother deceased</u> Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>Mar 29, 1956</u> License <u>3-29-56 4:46 P.</u> Marriage <u>April 7, 1956 11:10 A.</u> Place of Marriage <u>Fairmont, N.Y.</u>		Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	
Official <u>Elder P. Hutchinson</u> Profession <u>Minister of the word</u>		Official _____ Profession _____	
Period for solemnization of marriage begins at <u>4:46 P.M.</u> on the <u>30</u> day of <u>March</u> 19 <u>56</u> and ends the <u>25</u> day of <u>May</u> 19 <u>56</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u>	

Married to Star Dept
 March 5/5/56
 Reported to Star
 March 5/5/56

City Perinton County Monroe STATE OF NEW YORK No. 11
 Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>Frank Lee Johnson</u> (Full name)	Color <u>White</u>	Name <u>Peterson Ann Baker</u> (Full name)	Color <u>White</u>
Residence <u>Ontario, New York</u>	Age <u>21</u> 9/29/34	Residence <u>146 E. Commercial St. E. Rochester, N.Y.</u>	Age <u>17</u> 5/22/18
Occupation <u>Farmer - Self</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Ontario, New York</u>	Former wife or wives living or dead	Birthplace <u>Rochester, New York</u>	Former husband or husbands living or dead
Father <u>Carl S. Johnson</u> (Name of)	Divorced	Father <u>Charles Alva Baker</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Doris Henderson</u> (Maiden name of)	" where	Mother <u>Josephine Elizabeth Spallis</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>N.Y.S. Dept of Health, Albany, N.Y.</u> (Name and address of laboratory)	Date <u>3-5-56</u>	Laboratory Statement <u>N.Y.S. Dept of Health, Albany, N.Y.</u> (Name and address of laboratory)	Date <u>3-7-56</u>
Physician's Statement <u>Ernie Johnson</u> (Name and address of physician)	Date <u>3-3-56</u>	Physician's Statement <u>Ernie Johnson</u> (Name and address of physician)	Date <u>3-2-56</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by <u>Josephine E. Baker</u> Relation <u>Mother</u> Date <u>4/3/56</u>	
Consent by _____ Relation _____ Date _____		Consent by <u>Charles A. Baker</u> Relation <u>Father</u> Date <u>4/3/56</u>	
Proof of age <u>Automobile Drivers License</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>April 3, 1956</u> License <u>4-3-1956 5:08 P.</u> Marriage <u>April 7, 1956 11:00 P.</u> Place of Marriage <u>East Rochester, N.Y.</u>		Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	
Official <u>Anthony J. Colaneri</u> Profession <u>Catholic Priest</u>		Official _____ Profession _____	
Period for solemnization of marriage begins at <u>5:05 P.M.</u> on the <u>4</u> day of <u>April</u> 19 <u>56</u> and ends the <u>2</u> day of <u>June</u> 19 <u>56</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u>	

Married to Star Dept
 March 5/5/56
 Reported to Star
 March 5/5/56

City Perinton County Monroe STATE OF NEW YORK No. 12
 Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>John J. Giordano</u> (Full name)	Color <u>White</u>	Name <u>Julia Rosella</u> (Full name)	Color <u>White</u>
Residence <u>343 N. Bush St. Syracuse, N.Y.</u>	Age <u>39</u> 10-14-16	Residence <u>15 Water St. Fairport, N.Y.</u>	Age <u>33</u> 4-19-22
Occupation <u>Plaster - Contractor</u>	No. of marriage <u>1st</u>	Occupation <u>Restaurateur - Self</u>	No. of marriage <u>1st</u>
Birthplace <u>Syracuse, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport, N.Y.</u>	Former husband or husbands living or dead
Father <u>Antonio Giordano</u> (Name of)	Divorced	Father <u>John Rosella</u> (Name of)	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Catherine Peripigia</u> (Maiden name of)	" where	Mother <u>Jenny Guidicelli</u> (Maiden name of)	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe County Laboratory</u> (Name and address of laboratory)	Date <u>3-19-56</u>	Laboratory Statement <u>Monroe County Laboratory</u> (Name and address of laboratory)	Date <u>3-16-56</u>
Physician's Statement <u>Conner B. Gilvintani</u> (Name and address of physician)	Date <u>3-15-56</u>	Physician's Statement <u>John Kraai, Fairport, N.Y.</u> (Name and address of physician)	Date <u>3-12-56</u>
Examination requirements <u>none met</u>	dispensed with by judge or justice	Examination requirements <u>none met</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>April 5, 1956</u> License <u>4-3-56 4:35 P.</u> Marriage <u>April 7, 1956 10:00 P.</u> Place of Marriage <u>Fairport, N.Y.</u>		Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	
Official <u>Thomas A. Kelly</u> Profession <u>Catholic Priest</u>		Official _____ Profession _____	
Period for solemnization of marriage begins at <u>4:35 P.M.</u> on the <u>6</u> day of <u>April</u> 19 <u>56</u> and ends the <u>4</u> day of <u>June</u> 19 <u>56</u>		Period for solemnization of marriage begins at _____ on the _____ day of _____ 19 <u>56</u> and ends the _____ day of _____ 19 <u>56</u>	

Married to Star Dept
 March 5/5/56
 Reported to Star
 March 5/5/56

RECORD OF MARRIAGES

Mailed to State
Apr. 11/56
Report to Sec. Com.
March 5/1/56

City Perinton County Monroe STATE OF NEW YORK No. 13
Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>George Michael Donovan</u> (Full name)	Color <u>White</u>	<u>Patricia Ann Young</u> (Full name)	Color <u>White</u>
Residence <u>110 Adams St., Fairport, N.Y.</u>	Age <u>23</u> <u>5-4-22</u>	<u>243 Cornudas Rd., Perinton, N.Y.</u>	Age <u>20</u> <u>11-30-35</u>
Occupation <u>Shipping Clerk, Factory</u>	No. of marriage <u>1st</u>	<u>Statistical Assistant, Retail Store</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport, N.Y.</u>	Former wife or wives living or dead.	<u>Perinton, N.Y.</u>	Former husband or husbands living or dead.
Father <u>John Joseph Donovan</u> (Name of)	Divorced	<u>William Edward Young</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	<u>U.S.</u>	" when
Mother <u>Stella Campbell</u> (Maiden name of)	" where	<u>Jenestina Byrne</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	<u>U.S.</u>	" against whom
Laboratory Statement <u>University of Rochester</u> (Name and address of laboratory)	Date <u>3-29-56</u> (Test completed)	<u>University of Rochester</u> (Name and address of laboratory)	Date <u>3-29-56</u> (Test completed)
Physician's Statement <u>W.S. Muir</u> (Name and address of physician)	Date <u>3-27-56</u> (Specimen taken)	<u>W.S. Muir</u> (Name and address of physician)	Date <u>3-27-56</u> (Specimen taken)
Examination requirements <u>none not</u> (Were or were not)	dispensed with by judge or justice	<u>none not</u> (Were or were not)	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	

Date: Affidavit April 7, 1956 License April 7, 1956 11:30 A.M. Marriage April 14, 1956 10 A.M. Place of Marriage Perinton, N.Y.
Official Paul B. Borker Profession Catholic Priest Witness William Edward Young, 35 Columbia Ave., N.Y.
Period for solemnization of marriage begins at 11:30 A.M. on the 8 day of April 1956 and ends the 6 day of June 1956

City Perinton County Monroe STATE OF NEW YORK No. 14
Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>Austin Jerome Smalidge</u> (Full name)	Color <u>White</u>	<u>Angela Marie Castro</u> (Full name)	Color <u>White</u>
Residence <u>Wheat Rd., Monroe Falls, N.Y.</u>	Age <u>23</u> <u>3-31-1933</u>	<u>315 N. Seneca Rd., E. Rochester, N.Y.</u>	Age <u>21</u> <u>12-19-1934</u>
Occupation <u>Druggist - Manufacturing</u>	No. of marriage <u>1st</u>	<u>Posting Clerk - Manufacturing</u>	No. of marriage <u>1st</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead.	<u>Carbondale, Pa.</u>	Former husband or husbands living or dead.
Father <u>Austin Jerome Smalidge</u> (Name of)	Divorced	<u>Peter Castro (deceased)</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	<u>Italy</u>	" when
Mother <u>Louise Bertha French</u> (Maiden name of)	" where	<u>Catherine Marion Quastner</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	<u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories</u> (Name and address of laboratory)	Date <u>4-3-56</u> (Test completed)	<u>Monroe Co. Laboratories</u> (Name and address of laboratory)	Date <u>4-3-56</u> (Test completed)
Physician's Statement <u>Walter J. Madson</u> (Name and address of physician)	Date <u>3-31-56</u> (Specimen taken)	<u>Walter J. Madson</u> (Name and address of physician)	Date <u>3-31-56</u> (Specimen taken)
Examination requirements <u>none not</u> (Were or were not)	dispensed with by judge or justice	<u>none not</u> (Were or were not)	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	

Date: Affidavit April 9, 1956 License April 5, 1956 12:30 P.M. Marriage April 14, 1956 10 A.M. Place of Marriage East Rochester, N.Y.
Official Paul B. Borker Profession Catholic Priest Witness George W. Pringle, Monroe Falls, N.Y.
Period for solemnization of marriage begins at 12:30 P.M. on the 10 day of April 1956 and ends the 8 day of June 1956

City Perinton County Monroe STATE OF NEW YORK No. 15
Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>Dennis Francis Francipane</u> (Full name)	Color <u>White</u>	<u>Mary Alice Sosa</u> (Full name)	Color <u>White</u>
Residence <u>208 Madison St. E. Rochester, N.Y.</u>	Age <u>24</u> <u>3-8-32</u>	<u>205 Madison St. E. Rochester, N.Y.</u>	Age <u>23</u> <u>8-16-32</u>
Occupation <u>Central Town Operator</u>	No. of marriage <u>1st</u>	<u>Secretary, Government</u>	No. of marriage <u>1st</u>
Birthplace <u>U.S. Air Force</u>	Former wife or wives living or dead.	<u>San Antonio, Texas</u>	Former husband or husbands living or dead.
Father <u>Dame Francipane</u> (Name of)	Divorced	<u>James Hubert Sosa</u> (Name of)	Divorced
Birthplace <u>Italy</u>	" when	<u>U.S.</u>	" when
Mother <u>Teresa De Maer</u> (Maiden name of)	" where	<u>Maurilia Garga</u> (Maiden name of)	" where
Birthplace <u>Italy</u>	" against whom	<u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratories</u> (Name and address of laboratory)	Date <u>4-13-56</u> (Test completed)	<u>Monroe Co. Laboratories</u> (Name and address of laboratory)	Date <u>4-13-56</u> (Test completed)
Physician's Statement <u>Les Hoffman</u> (Name and address of physician)	Date <u>4-11-56</u> (Specimen taken)	<u>Les Hoffman, E. Rochester, N.Y.</u> (Name and address of physician)	Date <u>4-11-56</u> (Specimen taken)
Examination requirements <u>none not</u> (Were or were not)	dispensed with by judge or justice	<u>none not</u> (Were or were not)	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	

Date: Affidavit April 17, 1956 License 4-17-56 4:45 P.M. Marriage April 21, 1956 11 A.M. Place of Marriage East Rochester, N.Y.
Official Anthony J. Cimmino Profession Catholic Priest Witness Dennis Francipane, 205 Madison St. E. Rochester, N.Y.
Period for solemnization of marriage begins at 4:45 P.M. on the 15 day of April 1956 and ends the 16 day of June 1956

Mailed to State
Apr. 11/56
Report to Sec. Com.
March 5/1/56

RECORD OF MARRIAGES

City Town Perinton County Monroe STATE OF NEW YORK No. 16
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Frederick Charles Walton, Jr.</u> (Full name)	Color <u>White</u>	Name <u>Shirley Ann Stenwald</u> (Full name)	Color <u>White</u>
Residence <u>Haver Rd. Madison, NY</u>	Age <u>25</u> <u>7-16-1930</u>	Residence <u>1179 Cayuga Rd. Fairport, NY</u>	Age <u>20</u> <u>4-25-1935</u>
Occupation <u>Construction, Radio</u>	No. of marriage <u>1st</u>	Occupation <u>Official Clerk, Photography</u>	No. of marriage <u>1st</u>
Birthplace <u>Madison, New York</u>	Former wife or wives living or dead	Birthplace <u>Fairport, New York</u>	Former husband or husbands living or dead
Father <u>Frederick Charles Walton, Sr.</u> (Name of)	Divorced	Father <u>George Martin Stenwald</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Candice C. Brumba</u> (Maiden name of)	" where	Mother <u>Catherine Rose Salphine</u> (Maiden name of)	" where
Birthplace <u>England</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory <u>Monroe County Laboratories</u> Statement <u>435 E. Henrietta Rd. Rochester 20, NY</u> Date <u>4-17-56</u>	(Test completed)	Laboratory <u>Monroe County Laboratories</u> Statement <u>435 E. Henrietta Rd. Rochester 20, NY</u> Date <u>April 17-1956</u>	(Test completed)
Physician's <u>John Kraai, Fairport, NY</u> Date <u>4-12-56</u>	(Name and address of physician) (Specimen taken)	Physician's <u>John Kraai, Fairport, NY</u> Date <u>April 12, 1956</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>none not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>April 21, 1956</u> License <u>Apr 21, 1956 9:22 P.</u> Marriage <u>April 25, 1956 5:00 P.</u> Place of Marriage <u>Fairport, NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>April 21, 1956</u> License <u>Apr 21, 1956 9:22 P.</u> Marriage <u>April 25, 1956 5:00 P.</u> Place of Marriage <u>Fairport, NY</u>	(Month) (Day) (Year) (Hour)
Official <u>Marion Eugene Long</u> Profession <u>Chapman</u> Witness <u>Ernest S. Johnson, 396 Westfield Rd. Perinton, NY</u>		Official <u>Marion Eugene Long</u> Profession <u>Chapman</u> Witness <u>Ernest S. Johnson, 396 Westfield Rd. Perinton, NY</u>	
Period for solemnization of marriage begins at <u>9:32 P.M.</u> on the <u>22</u> day of <u>April</u> 19 <u>56</u> and ends the <u>20</u> day of <u>June</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>9:32 P.M.</u> on the <u>22</u> day of <u>April</u> 19 <u>56</u> and ends the <u>20</u> day of <u>June</u> 19 <u>56</u>	

Reported to State Dept. March 5/56
Reported to State Dept. March 5/56
Reported to State Dept. March 6/56
Reported to State Dept. March 6/56
Reported to State Dept. March 6/56

City Town Perinton County Monroe STATE OF NEW YORK No. 17
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Robert Walter Abbey</u> (Full name)	Color <u>White</u>	Name <u>Francesa Marie Parrea</u> (Full name)	Color <u>White</u>
Residence <u>R.B. #1 Beth, N.Y.</u>	Age <u>19</u> <u>5/19/36</u>	Residence <u>112 Paul Ave., Fairport, NY</u>	Age <u>19</u> <u>12/31/36</u>
Occupation <u>Musician - U.S. Navy</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Bronxville, New York</u>	Former wife or wives living or dead	Birthplace <u>Fairport, New York</u>	Former husband or husbands living or dead
Father <u>Warren Raymond Abbey</u> (Name of)	Divorced	Father <u>Julio Parrea</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Catherine Mary Ward</u> (Maiden name of)	" where	Mother <u>Rose Frances Mammie</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory <u>Stanton Co. Laboratories</u> Statement <u>Stanton, New York</u> Date <u>5/7/56</u>	(Name and address of laboratory) (Test completed)	Laboratory <u>Stanton, New York</u> Statement <u>Stanton, New York</u> Date <u>5/4/56</u>	(Name and address of laboratory) (Test completed)
Physician's <u>Thomas B. Hutchings, M.D.</u> Statement <u>121 E. Stanton St. Beth, NY</u> Date <u>5/5/56</u>	(Name and address of physician) (Specimen taken)	Physician's <u>G. N. Guthrie, 11600 South Ave. Rochester, NY</u> Date <u>5/5/56</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>none not</u> dispensed with by judge or justice	(Were or were not)
Consent by <u>Warren R. Abbey</u> Relation <u>Father</u> Date <u>May 9, 1956</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Catherine W. Abbey</u> Relation <u>Mother</u> Date <u>May 9, 1956</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth Certificate</u> (Form)		Proof of age <u>Birth Certificate</u> (Form)	
Date: Affidavit <u>May 9, 1956</u> License <u>5-9-56 12:15 P.</u> Marriage <u>May 12, 1956 11:00 A.M.</u> Place of Marriage <u>Fairport, New York</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>May 9, 1956</u> License <u>5-9-56 12:15 P.</u> Marriage <u>May 12, 1956 11:00 A.M.</u> Place of Marriage <u>Fairport, New York</u>	(Month) (Day) (Year) (Hour)
Official <u>Samuel A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Antonette Mott, Fairport, NY</u>		Official <u>Samuel A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Antonette Mott, Fairport, NY</u>	
Period for solemnization of marriage begins at <u>12:15 P.M.</u> on the <u>10</u> day of <u>May</u> 19 <u>56</u> and ends the <u>5</u> day of <u>July</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>12:15 P.M.</u> on the <u>10</u> day of <u>May</u> 19 <u>56</u> and ends the <u>5</u> day of <u>July</u> 19 <u>56</u>	

City Town Perinton County Monroe STATE OF NEW YORK No. 18
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Howard Lloyd Mason</u> (Full name)	Color <u>White</u>	Name <u>Theresa Josephine Crocetti</u> (Full name)	Color <u>White</u>
Residence <u>P.O. Box 44, Co. Palmyra, NY</u>	Age <u>25</u> <u>3/24/31</u>	Residence <u>52 Steel Street, Fairport, NY</u>	Age <u>21</u> <u>7/2/34</u>
Occupation <u>Factory Worker, Coal Company</u>	No. of marriage <u>1st</u>	Occupation <u>Clk - Factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Madison, NY</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Fay Sidney Mason</u> (Name of)	Divorced	Father <u>John Crocetti</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Florence May Mc Kee</u> (Maiden name of)	" where	Mother <u>Mary Lena Scarazzo</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory <u>Monroe County Laboratories</u> Statement <u>435 E. Henrietta Rd. Rochester 20, NY</u> Date <u>5/1/56</u>	(Name and address of laboratory) (Test completed)	Laboratory <u>Monroe County Laboratories</u> Statement <u>435 E. Henrietta Rd. Rochester 20, NY</u> Date <u>5/1/56</u>	(Name and address of laboratory) (Test completed)
Physician's <u>George A. Dean, Fairport, NY</u> Date <u>4/30/56</u>	(Name and address of physician) (Specimen taken)	Physician's <u>Ernie Jordan, M.D., Fairport, NY</u> Date <u>4/25/56</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>none not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>none not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>May 12, 1956</u> License <u>5/12/56 11:39 A.</u> Marriage <u>May 19, 1956 11 A.M.</u> Place of Marriage <u>Fairport, NY</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>May 12, 1956</u> License <u>5/12/56 11:39 A.</u> Marriage <u>May 19, 1956 11 A.M.</u> Place of Marriage <u>Fairport, NY</u>	(Month) (Day) (Year) (Hour)
Official <u>Vincent P. Collins</u> Profession <u>Priest</u> Witness <u>Blair B. Kammer, Perinton, NY</u>		Official <u>Vincent P. Collins</u> Profession <u>Priest</u> Witness <u>Blair B. Kammer, Perinton, NY</u>	
Period for solemnization of marriage begins at <u>11:37 A.M.</u> on the <u>13</u> day of <u>May</u> 19 <u>56</u> and ends the <u>11</u> day of <u>July</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>11:37 A.M.</u> on the <u>13</u> day of <u>May</u> 19 <u>56</u> and ends the <u>11</u> day of <u>July</u> 19 <u>56</u>	

RECORD OF MARRIAGES

Reported to State Com. May 4/1/56
 Mailed to State Com. Sept. 4/1/56
 Reported to State Com. May 4/1/56
 Mailed to State Com. Sept. 4/1/56
 Reported to State Com. May 4/1/56
 Mailed to State Com. Sept. 4/1/56

City Perinton County Monroe STATE OF NEW YORK No. 19
 Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>John Lawrence Stealy</u>	Color <u>White</u>	Name <u>Clara Alberta Bannage</u>	Color <u>White</u>
Residence <u>215 East Ave. E. Rochester, N.Y.</u>	Age <u>21</u> 3/9/35	Residence <u>225 E. Chestnut St., E. Rochester, N.Y.</u>	Age <u>20</u> 5/9/36
Occupation <u>Electrician Wash. Car Works</u>	No. of marriage <u>1st</u>	Occupation <u>Bookbinding - Food Processing</u>	No. of marriage <u>1st</u>
Birthplace <u>E. Rochester, New York</u>	Former wife or wives living or dead.	Birthplace <u>Canastota, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Leather Raymond Stealy</u>	Divorced	Father <u>Paul Bannage</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Jenny Mary Kelen</u>	" where	Mother <u>Edith Irene Chyler</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab., Rochester, N.Y.</u>	Date <u>May 10, 1956</u>	Laboratory Statement <u>Rochester Health Bureau Lab., Rochester, N.Y.</u>	Date <u>May 10, 1956</u>
Physician's Statement <u>Charles P. Haver, M.D., 115 West Ave. E. Rochester, N.Y.</u>	Date <u>May 7, 1956</u>	Physician's Statement <u>Charles P. Haver, M.D., 115 West Ave. E. Rochester, N.Y.</u>	Date <u>May 7, 1956</u>
Examination requirements <u>none not</u>	dispensed with by judge or justice	Examination requirements <u>none not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>Birth Certificate</u>	(Form)	Proof of age <u>Birth Certificate</u>	(Form)
Date: Affidavit <u>May 15, 1956</u> License <u>5-15-56</u> 11:20 P.M. Marriage <u>May 18, 1956</u> 2 P.M. Place of Marriage <u>East Rochester, N.Y.</u>		Date: Affidavit <u>May 15, 1956</u> License <u>5-15-56</u> 11:20 P.M. Marriage <u>May 18, 1956</u> 2 P.M. Place of Marriage <u>East Rochester, N.Y.</u>	
Official <u>William R. Adams, 507 Main St. E. Rochester, N.Y.</u> Profession <u>Clergyman</u>		Official <u>William R. Adams, 507 Main St. E. Rochester, N.Y.</u> Profession <u>Clergyman</u>	
Period for solemnization of marriage begins at <u>11:19 P.M.</u> on the <u>16</u> day of <u>May</u> 19 <u>56</u> and ends the <u>14</u> day of <u>July</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>11:19 P.M.</u> on the <u>16</u> day of <u>May</u> 19 <u>56</u> and ends the <u>14</u> day of <u>July</u> 19 <u>56</u>	

City Perinton County Monroe STATE OF NEW YORK No. 20
 Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>Joseph Anthony Di Biase</u>	Color <u>White</u>	Name <u>Patricia Ann Watter</u>	Color <u>White</u>
Residence <u>209 W. Chestnut St. E. Rochester, N.Y.</u>	Age <u>24</u> 9/22/31	Residence <u>119 W. Commercial St., E. Rochester, N.Y.</u>	Age <u>18</u> 11/27/37
Occupation <u>Salesman - Pine Strapping</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>E. Rochester, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Brighton, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Joseph Anthony Di Biase</u>	Divorced	Father <u>Fredrick Albert Watter</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Allan Cappiell</u>	" where	Mother <u>Lola Dorothy Cook</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe Co. Laboratory, 435 E. Henrietta Rd. Rochester, N.Y.</u>	Date <u>May 11, 1956</u>	Laboratory Statement <u>Monroe Co. Laboratory, 435 E. Henrietta Rd. Rochester, N.Y.</u>	Date <u>May 11, 1956</u>
Physician's Statement <u>Joseph J. Haler, M.D., E. Rochester, N.Y.</u>	Date <u>May 9, 1956</u>	Physician's Statement <u>Joseph J. Haler, M.D., E. Rochester, N.Y.</u>	Date <u>May 9, 1956</u>
Examination requirements <u>none not</u>	dispensed with by judge or justice	Examination requirements <u>none not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>Birth Certificate</u>	(Form)	Proof of age <u>Birth Certificate</u>	(Form)
Date: Affidavit <u>May 15, 1956</u> License <u>5/18/56</u> 4:55 P.M. Marriage <u>May 26, 1956</u> 11 A.M. Place of Marriage <u>East Rochester, N.Y.</u>		Date: Affidavit <u>May 15, 1956</u> License <u>5/18/56</u> 4:55 P.M. Marriage <u>May 26, 1956</u> 11 A.M. Place of Marriage <u>East Rochester, N.Y.</u>	
Official <u>Anthony F. Capinori, 203 S. Prospect St. E. Rochester, N.Y.</u> Profession <u>Catholic Priest</u>		Official <u>Robert John Mandelaro, 316 E. Commercial St. E. Rochester, N.Y.</u> Profession <u>Witness</u>	
Period for solemnization of marriage begins at <u>4:55 P.M.</u> on the <u>19</u> day of <u>May</u> 19 <u>56</u> and ends the <u>17</u> day of <u>July</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>4:55 P.M.</u> on the <u>19</u> day of <u>May</u> 19 <u>56</u> and ends the <u>17</u> day of <u>July</u> 19 <u>56</u>	

City Perinton County Monroe STATE OF NEW YORK No. 21
 Clerk Elizabeth E. Little

GROOM		BRIDE	
Name <u>Raymond Barnhart Jensen</u>	Color <u>White</u>	Name <u>Mary Louise Kitzberger Heng</u>	Color <u>White</u>
Residence <u>777 Whitney Rd. Fairport, N.Y.</u>	Age <u>35</u> 4/15/1921	Residence <u>193 Lomb Rd., Fairport, N.Y.</u>	Age <u>38</u> 11/5/1917
Occupation <u>Assembly - Manufacturing</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>2nd</u>
Birthplace <u>Perinton, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead. <u>dead</u>
Father <u>Barnhart Jensen</u>	Divorced	Father <u>Anton Kitzberger (deceased)</u>	Divorced
Birthplace <u>Denmark</u>	" when	Birthplace <u>Germany</u>	" when
Mother <u>Grace Edith Priest</u>	" where	Mother <u>Dulcie Baker</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>N.Y. State Dept. of Health, 515 E. State St. Rochester, N.Y.</u>	Date <u>5/11/56</u>	Laboratory Statement <u>N.Y. State Dept. of Health, 515 E. State St. Rochester, N.Y.</u>	Date <u>5/11/56</u>
Physician's Statement <u>Conrad L. Lutz, M.D., 315 E. Commercial St. Rochester, N.Y.</u>	Date <u>5/11/56</u>	Physician's Statement <u>Conrad L. Lutz, M.D., 315 E. Commercial St. Rochester, N.Y.</u>	Date <u>5/11/56</u>
Examination requirements <u>none not</u>	dispensed with by judge or justice	Examination requirements <u>none not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>Birth Certificate</u>	(Form)	Proof of age <u>Birth Certificate</u>	(Form)
Date: Affidavit <u>May 15, 1956</u> License <u>5/19/56</u> 11:54 A.M. Marriage <u>May 29, 1956</u> 3 P.M. Place of Marriage <u>Fairport, N.Y.</u>		Date: Affidavit <u>May 15, 1956</u> License <u>5/19/56</u> 11:54 A.M. Marriage <u>May 29, 1956</u> 3 P.M. Place of Marriage <u>Fairport, N.Y.</u>	
Official <u>Clifford G. Fairport, N.Y.</u> Profession <u>Clergyman</u>		Official <u>James G. Kitzberger, 315 E. Commercial St. Rochester, N.Y.</u> Profession <u>Witness</u>	
Period for solemnization of marriage begins at <u>11:54 A.M.</u> on the <u>20</u> day of <u>May</u> 19 <u>56</u> and ends the <u>18</u> day of <u>July</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>11:54 A.M.</u> on the <u>20</u> day of <u>May</u> 19 <u>56</u> and ends the <u>18</u> day of <u>July</u> 19 <u>56</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 25

Clerk Elizabeth E. Little

GROOM

Name Donald William Silver Color White
 Residence 1211 Harris Rd., Fairfield, N.Y. Age 36 12/13/1919
 Occupation Foreman - Manufacturing No. of marriage 1st
 Birthplace Fairfield, N.Y. Former wife or wives living or dead
 Father William James Silver Divorced
 Birthplace U.S. " when
 Mother May Augusta Ginzaw " where
 Birthplace U.S. " against whom

Laboratory Monroe Co. Lab. Date 5/15/56
 Statement 435 E. Henrietta Rd., Rochester 20, N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement Walter S. Buhety Date 5/16/56
 Statement 20 W. Church St., Fairport, N.Y. (Name and address of physician) (Specimens taken)
 Examination requirements none not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

BRIDE

Name Deane Alice Quany Color White
 Residence 2585 Penney Rd., Fairport, N.Y. Age 23 4/6/1921
 Occupation Office Manager, Conroy No. of marriage 1st
 Birthplace Wayland, N.Y. Former husband or husbands living or dead
 Divorced
 " when
 " where
 " against whom

Laboratory Monroe Co. Lab. Date 5/15/56
 Statement 435 E. Henrietta Rd., Rochester 20, N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement Walter S. Buhety Date 5/16/56
 Statement 20 W. Church St., Fairport, N.Y. (Name and address of physician) (Specimens taken)
 Examination requirements none not (Were or were not) dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

Date: Affidavit June 2, 1956 License June 2, 1956 11:37 A.M. Marriage June 9, 1956 11 A.M. Place of Marriage Fairport, N.Y.
 Official Joseph A. Robinson Profession Catholic Priest Witness Marie Quany, 110 Park Ave., Rochester 20, N.Y.
 Period for solemnization of marriage begins at 11:37 A.M. on the 3 day of June 1956 and ends the 1 day of August 1956

City Perinton County Monroe STATE OF NEW YORK No. 26

Clerk Elizabeth E. Little

GROOM

Name Joseph Conrad Malich Color White
 Residence 55 Frank St., Fairport, N.Y. Age 23 4/1/33
 Occupation Cabination - Manufacturing No. of marriage 1st
 Birthplace Mt. Carmel, Pa. Former wife or wives living or dead
 Father Joseph John Malich Divorced
 Birthplace U.S. " when
 Mother Susan Ann Kuntz " where
 Birthplace U.S. " against whom

Laboratory Monroe County Laboratory Date 5/22/56
 Statement 435 E. Henrietta Rd., Rochester 20, N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Krasai, Fairport, N.Y. Date 5/22/56
 Statement _____ (Name and address of physician) (Specimens taken)
 Examination requirements none not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

BRIDE

Name Antia Marie Tortolosa Color White
 Residence 71 East Ave., Fairport, N.Y. Age 24 11/21/1931
 Occupation Cabination - Manufacturing No. of marriage 1st
 Birthplace Casalborsino, Italy Former husband or husbands living or dead
 Divorced
 " when
 " where
 " against whom

Laboratory Monroe County Laboratory Date 5/22/56
 Statement 435 E. Henrietta Rd., Rochester 20, N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Krasai, Fairport, N.Y. Date 5/22/56
 Statement _____ (Name and address of physician) (Specimens taken)
 Examination requirements none not (Were or were not) dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

Date: Affidavit June 2, 1956 License June 2, 1956 12:16 Marriage June 9, 1956 10 A.M. Place of Marriage Fairport, New York
 Official Joseph A. Kelly Profession Catholic Priest Witness Thomas A. Zibulski, 222 W. Chestnut St., Fairport, N.Y.
 Period for solemnization of marriage begins at 12:16 P.M. on the 3 day of June 1956 and ends the 1 day of August 1956

City Perinton County Monroe STATE OF NEW YORK No. 27

Clerk Elizabeth H. Pierce

GROOM

Name Richard Thomas Priest Color White
 Residence 2623 Penney Rd., Fairport, N.Y. Age 19 12/12/36
 Occupation Truck Driver - Construction No. of marriage 1st
 Birthplace Fairfield, N.Y. Former wife or wives living or dead
 Father Myron Priest Divorced
 Birthplace U.S.A. " when
 Mother Beulah Bronkema " where
 Birthplace U.S.A. " against whom

Laboratory Monroe County Laboratory Date 6/8/56
 Statement 435 E. Henrietta Rd., Rochester 20, N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Krasai, Fairport, N.Y. Date 6/6/56
 Statement _____ (Name and address of physician) (Specimens taken)
 Examination requirements none not dispensed with by judge or justice
 Consent by Myron Priest Relation Father Date June 11, 1956
 Consent by Beulah Priest Relation Mother Date June 11, 1956

Proof of age Automobile Driver's License (Form)

BRIDE

Name Elaine Audrey Schilling Color White
 Residence 695 W. Whitney Rd., Fairport, N.Y. Age 19 4/13/37
 Occupation Operator - Telephone Co. No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead
 Divorced
 " when
 " where
 " against whom

Laboratory Monroe County Laboratory Date 6/8/56
 Statement 435 E. Henrietta Rd., Rochester 20, N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Krasai, Fairport, N.Y. Date 6/6/56
 Statement _____ (Name and address of physician) (Specimens taken)
 Examination requirements none not (Were or were not) dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age Birth Certificate (Form)

Date: Affidavit June 11, 1956 License June 11, 1956 7:50 P.M. Marriage June 16, 1956 11 A.M. Place of Marriage Fairport, N.Y.
 Official Joseph A. Kelly Profession Catholic Priest Witness James De Witt, 173 Madison St., Fairport, N.Y.
 Period for solemnization of marriage begins at 7:50 P.M. on the 12 day of June 1956 and ends the 10 day of August 1956

Reported to State Com. 7/1/56
 Mailed to State Dept. 7/1/56
 Reported to State Com. 7/1/56
 Mailed to State Dept. 7/1/56
 Reported to State Com. 7/1/56
 Mailed to State Dept. 7/1/56
 Reported to State Com. 7/1/56
 Mailed to State Dept. 7/1/56

RECORD OF MARRIAGES

Reported to State Dept. of Health 7/11/56
Mailed to State Dept. of Health 7/15/56

City Perinton County Monroe STATE OF NEW YORK No. 28
 Clerk Elizabet H. Pierce

GROOM		BRIDE	
Name <u>Frank Franklin De Rue</u> (Full name)	Color <u>White</u>	Name <u>Carol Barbara Camp</u> (Full name)	Color <u>White</u>
Residence <u>42 East Ave., Fairport, NY</u>	Age <u>22</u> <u>5/23/34</u>	Residence <u>26 South Ave., Fairport, NY</u>	Age <u>21</u> <u>7/24/34</u>
Occupation <u>Sergeant - U.S. Marine Corp</u>	No. of marriage <u>1st</u>	Occupation <u>Teacher - Elementary School</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport, NY</u>	Former wife or wives living or dead	Birthplace <u>Rockton, NY</u>	Former husband or husbands living or dead
Father <u>Albion De Rue</u> (Name of)	Divorced	Father <u>Henry Harrison Camp</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Sarah Elsie Witt</u> (Maiden name of)	" where	Mother <u>Grace Vary Carver</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rockton Health Bureau</u> (Name and address of laboratory)	Date <u>6/13/56</u> (Test completed)	Laboratory Statement <u>Rockton Health Bureau</u> (Name and address of laboratory)	Date <u>6/13/56</u> (Test completed)
Physician's Statement <u>W. Andrew Dale</u> (Name and address of physician)	Date <u>6/11/56</u> (Specimen taken)	Physician's Statement <u>W. Andrew Dale</u> (Name and address of physician)	Date <u>6/11/56</u> (Specimen taken)
Examination requirements <u>were not</u> (Were or were not)	dispensed with by judge or justice	Examination requirements <u>were not</u> (Were or were not)	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 13, 1956</u> License <u>June 13, 1956 11:30 A.M.</u> Marriage <u>June 16, 1956 2 P.M.</u> Place of Marriage <u>Fairport, NY</u> (Month) (Day) (Year) (Hour)		Date: Affidavit <u>June 13, 1956</u> License <u>June 13, 1956 11:30 A.M.</u> Marriage <u>June 16, 1956 2 P.M.</u> Place of Marriage <u>Fairport, NY</u> (Month) (Day) (Year) (Hour)	
Official <u>Elizabet H. Pierce</u> Profession <u>Clergymen</u>	Witness <u>Howard Tussick Seaman, 35 South Ave., Fairport, NY</u>	Official <u>Elizabet H. Pierce</u> Profession <u>Clergymen</u>	Witness <u>Howard Tussick Seaman, 35 South Ave., Fairport, NY</u>
Period for solemnization of marriage begins at <u>11:30 A.M.</u> on the <u>16</u> day of <u>June</u> 19 <u>56</u> and ends the <u>12</u> day of <u>August</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>11:30 A.M.</u> on the <u>16</u> day of <u>June</u> 19 <u>56</u> and ends the <u>12</u> day of <u>August</u> 19 <u>56</u>	

Mailed to State Dept. of Health 8/15/56

City Perinton County Monroe STATE OF NEW YORK No. 29
 Clerk Elizabet H. Pierce

GROOM		BRIDE	
Name <u>Stanley Irving Mason</u> (Full name)	Color <u>White</u>	Name <u>Constance Marie Root</u> (Full name)	Color <u>White</u>
Residence <u>231 South Union St., Fairport, NY</u>	Age <u>22</u> <u>7/9/33</u>	Residence <u>106 Bluebird Ave., Fairport, NY</u>	Age <u>21</u> <u>10/18/34</u>
Occupation <u>Clerk - Dept. of Health</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rockton, NY</u>	Former wife or wives living or dead	Birthplace <u>Rockton, NY</u>	Former husband or husbands living or dead
Father <u>Edward Valentine Mason</u> (Name of)	Divorced	Father <u>Howard Wesley Root</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Florence Ida Widriak</u> (Maiden name of)	" where	Mother <u>Grace Marguerite Wallington</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Lab.</u> (Name and address of laboratory)	Date <u>6/22/56</u> (Test completed)	Laboratory Statement <u>Monroe County Lab.</u> (Name and address of laboratory)	Date <u>6/22/56</u> (Test completed)
Physician's Statement <u>John Kraus, Fairport, NY</u> (Name and address of physician)	Date <u>6/18/56</u> (Specimen taken)	Physician's Statement <u>John Kraus, Fairport, NY</u> (Name and address of physician)	Date <u>6/18/56</u> (Specimen taken)
Examination requirements <u>were not</u> (Were or were not)	dispensed with by judge or justice	Examination requirements <u>were not</u> (Were or were not)	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 27, 1956</u> License <u>6-27-1956 10:30 A.M.</u> Marriage <u>July 14, 1956 2 P.M.</u> Place of Marriage <u>Fairport, NY</u> (Month) (Day) (Year) (Hour)		Date: Affidavit <u>June 27, 1956</u> License <u>6-27-1956 10:30 A.M.</u> Marriage <u>July 14, 1956 2 P.M.</u> Place of Marriage <u>Fairport, NY</u> (Month) (Day) (Year) (Hour)	
Official <u>Elizabet H. Pierce</u> Profession <u>Clergymen</u>	Witness <u>John J. Dwyer, 54 Belmont Ave., Fairport, NY</u>	Official <u>Elizabet H. Pierce</u> Profession <u>Clergymen</u>	Witness <u>John J. Dwyer, 54 Belmont Ave., Fairport, NY</u>
Period for solemnization of marriage begins at <u>10:30 A.M.</u> on the <u>25</u> day of <u>June</u> 19 <u>56</u> and ends the <u>26</u> day of <u>August</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>10:30 A.M.</u> on the <u>25</u> day of <u>June</u> 19 <u>56</u> and ends the <u>26</u> day of <u>August</u> 19 <u>56</u>	

Mailed to State Dept. of Health 8/15/56

City Perinton County Monroe STATE OF NEW YORK No. 30
 Clerk Elizabet E. Little

GROOM		BRIDE	
Name <u>John Ernest Doyle</u> (Full name)	Color <u>White</u>	Name <u>Dunziata Tortorici</u> (Full name)	Color <u>White</u>
Residence <u>22 Wick Park, Rockton, NY</u>	Age <u>26</u> <u>4/24/30</u>	Residence <u>216 E. Commercial St., Rockton, NY</u>	Age <u>23</u> <u>3/27/33</u>
Occupation <u>Machinist - Gear Cutting</u>	No. of marriage <u>1st</u>	Occupation <u>Teacher - Public Schools</u>	No. of marriage <u>1st</u>
Birthplace <u>Carbondale, Pa.</u>	Former wife or wives living or dead	Birthplace <u>Rockton, NY</u>	Former husband or husbands living or dead
Father <u>William Theobald Doyle</u> (Name of)	Divorced	Father <u>Angelo Tortorici</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Helen Marie Younskowski</u> (Maiden name of)	" where	Mother <u>Maria Bertolina</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Rockton Health Bureau Lab.</u> (Name and address of laboratory)	Date <u>6/15/56</u> (Test completed)	Laboratory Statement <u>Rockton Health Bureau Lab., Rockton, NY</u> (Name and address of laboratory)	Date <u>6/15/56</u> (Test completed)
Physician's Statement <u>Charles R. Harris</u> (Name and address of physician)	Date <u>6/15/56</u> (Specimen taken)	Physician's Statement <u>Charles R. Harris, 115 West Ave., Rockton, NY</u> (Name and address of physician)	Date <u>6/15/56</u> (Specimen taken)
Examination requirements <u>were not</u> (Were or were not)	dispensed with by judge or justice	Examination requirements <u>were not</u> (Were or were not)	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 30, 1956</u> License <u>June 30, 1956 10:02 A.M.</u> Marriage <u>July 14, 1956 10 A.M.</u> Place of Marriage <u>Rockton, NY</u> (Month) (Day) (Year) (Hour)		Date: Affidavit <u>June 30, 1956</u> License <u>June 30, 1956 10:02 A.M.</u> Marriage <u>July 14, 1956 10 A.M.</u> Place of Marriage <u>Rockton, NY</u> (Month) (Day) (Year) (Hour)	
Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>	Witness <u>John Logghegan, 6 Rockton, NY</u>	Official <u>Ray B. Murphy</u> Profession <u>Catholic Priest</u>	Witness <u>John Logghegan, 6 Rockton, NY</u>
Period for solemnization of marriage begins at <u>10:02 A.M.</u> on the <u>14</u> day of <u>July</u> 19 <u>56</u> and ends the <u>27</u> day of <u>August</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>10:02 A.M.</u> on the <u>14</u> day of <u>July</u> 19 <u>56</u> and ends the <u>27</u> day of <u>August</u> 19 <u>56</u>	

RECORD OF MARRIAGES

Mailed to State Dept. of Health 8/1/56 Reported to State Dept. of Health 8/1/56

City Perinton County Monroe STATE OF NEW YORK No. 31
Clerk Elizabeth L. Foster

GROOM

Name Walter Henry Newark Color White
 Residence 171 Central Drive, Rochester, N.Y. Age 37 7/5/1915
 Occupation Inspection, Clothing
 Birthplace Rochester, N.Y. No. of marriage 2nd
 Former wife or wives living or dead living
 Father Walter Joseph Newark Divorced Yes
 Birthplace Poland " when May 4, 1915
 Mother Stephany Cislerowicz " where Rochester, N.Y.
 Birthplace Poland " against whom Anna Mary Kuhn Nowak
 Laboratory Statement Rochester Health Bureau Date 6/20/56 (Test completed)
 Physician's Statement Joseph M. Cichy, 2924 St. Paul St., Rochester, N.Y. Date 6/15/56 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

BRIDE

Name Sally Cecilia Parks Color White
 Residence 42 E. Linden Ave., E. Rochester, N.Y. Age 25 2/10/1931
 Occupation Bookkeeper - Johnson & Butrie St.
 Birthplace East Rochester, N.Y. No. of marriage 2nd
 Former husband or husbands living or dead dead
 Father Cesar Cislina Divorced Yes
 Birthplace Italy " when _____
 Mother Julia Palermo " where _____
 Birthplace Italy " against whom _____
 Laboratory Statement Monroe County Laboratory, 435 E. Henrietta Rd., Rochester, N.Y. Date 6/13/56 (Test completed)
 Physician's Statement E.S. Havel, Penfield, N.Y. Date 6/15/56 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
Date: Affidavit July 2, 1956 License July 2, 1956 11:47 A.M. Marriage July 12, 1956 1 P.M. Place of Marriage East Rochester, N.Y.
Official Robert W. Pursell Profession Judge of Peace Witness Mrs. Gladys Tallman - Penfield, N.Y.
Period for solemnization of marriage begins at 11:07 A.M. on the 8 day of July 1956 and ends the 10 day of September 1956

City Perinton County Monroe STATE OF NEW YORK No. 32
Clerk Elizabeth H. Pursell

GROOM

Name Robert William Blocher Color White
 Residence Sand Hill Rd., Caledonia, N.Y. Age 21 7/27/34
 Occupation Medicinal, Medicine Co.
 Birthplace Williamson, N.Y. No. of marriage 1st
 Former wife or wives living or dead _____
 Father Robert DeWayne Blocher Divorced _____
 Birthplace U.S. " when _____
 Mother Anna Dorothy Boyko " where _____
 Birthplace Austria " against whom _____
 Laboratory Statement Rochester Health Bureau, 435 E. Henrietta Rd., Rochester, N.Y. Date 7/3/56 (Test completed)
 Physician's Statement Wm. S. Ausalone, 1 Church Street, Caledonia, N.Y. Date 7/3/56 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

BRIDE

Name Lillian Catherine Finney Color White
 Residence 137 E. Chestnut St., E. Rochester, N.Y. Age 19 8/25/36
 Occupation Secretary, Printing & Binding Co.
 Birthplace East Rochester, N.Y. No. of marriage 1st
 Former husband or husbands living or dead _____
 Father Paul Harold Finney Divorced _____
 Birthplace U.S. " when _____
 Mother Lillian Blanche Hamcatter " where _____
 Birthplace U.S. " against whom _____
 Laboratory Statement Rochester Health Bureau, 435 E. Henrietta Rd., Rochester, N.Y. Date 7/9/56 (Test completed)
 Physician's Statement Wm. S. Ausalone, 1 Church Street, Caledonia, N.Y. Date 7/3/56 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age Certified Birth Book (Form)
Date: Affidavit July 10, 1956 License July 10, 1956 4:23 P.M. Marriage July 14, 1956 6 P.M. Place of Marriage East Rochester, N.Y.
Official Carroll T. Wickert Profession Clergyman Witness Sally Jo Hopkins, E. Rochester, N.Y.
Period for solemnization of marriage begins at 4:23 P.M. on the 11 day of July 1956 and ends the 9 day of September 1956

City Perinton County Monroe STATE OF NEW YORK No. 33
Clerk Elizabeth H. Pursell

GROOM

Name James Eric Christman Color White
 Residence 240 Watson Rd., Penfield Age 26 8/6/1929
 Occupation Engineer - U.S. Army
 Birthplace Penfield, N.Y. No. of marriage 1st
 Former wife or wives living or dead _____
 Father James William Christman Divorced _____
 Birthplace U.S.A. " when _____
 Mother Jennie May Brunde " where _____
 Birthplace U.S.A. " against whom _____
 Laboratory Statement Monroe County Laboratory, 435 E. Henrietta Rd., Rochester, N.Y. Date 7/13/56 (Test completed)
 Physician's Statement John Kraai, Fairport, N.Y. Date 7/6/56 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

BRIDE

Name Betty Arlene Hunt Color White
 Residence 33 East Ave., Fairport, N.Y. Age 27 10/28/1928
 Occupation Assembler - Factory
 Birthplace Penfield, N.Y. No. of marriage 1st
 Former husband or husbands living or dead _____
 Father Leo Hunt Divorced _____
 Birthplace U.S.A. " when _____
 Mother Florence Belle Mayo " where _____
 Birthplace U.S.A. " against whom _____
 Laboratory Statement Monroe County Laboratory, 435 E. Henrietta Rd., Rochester, N.Y. Date 7/13/56 (Test completed)
 Physician's Statement John Kraai, Fairport, N.Y. Date 7/7/56 (Specimen taken)
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)
Date: Affidavit July 14, 1956 License July 14, 1956 4:50 A.M. Marriage Aug. 4, 1956 2:00 P.M. Place of Marriage Fairport, N.Y.
Official Monica Eugene Levy Profession Clergyman Witness Wm. Hamner, 1560 W. Henrietta Rd., Rochester, N.Y.
Period for solemnization of marriage begins at 4:50 P.M. on the 15 day of July 1956 and ends the 13 day of September 1956

Mailed to State Dept. of Health 9/5/56 Reported to State Dept. of Health 9/5/56

RECORD OF MARRIAGES

Reported to State Com. Health 8/1/56
Mailed to State Dept. Health 8/5/56

City Perinton County Monroe STATE OF NEW YORK No. 34
Clerk Elizabeth H. Pierce

GROOM
Name Earl Donovan Kelcey Color White
Residence Monroe St. Fairport, N.Y. Age 23 4/5/33
Occupation Mechanics Contractor
Birthplace Fairport, N.Y.
Father Clyde Earl Kelcey
Birthplace U.S.
Mother Dorothy Grace Donovan
Birthplace Canada
Laboratory Statement Monroe County Laboratories
Physician's Statement John Kraus, Fairport, N.Y.
Examination requirements none met
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form) _____
Date: Affidavit July 21, 1956 License July 21, 1956 9:27 A. Marriage July 28, 1956 2 P. Place of Marriage Fairport, N.Y.
Official James G. Ruppert Profession American Clergymen Witness James Carlson, 24 Summit St. Fairport, N.Y.
Period for solemnization of marriage begins at 9:27 A.M. on the 22 day of July 1956 and ends the 20 day of September 1956

BRIDE
Name Anna Marie Carlson Color White
Residence 24 Summit St., Fairport, N.Y. Age 20 8/23/35
Occupation Commercial Art - Advertising
Birthplace Somerset Falls, N.Y.
Father Quatern Elness Carlson
Birthplace U.S.
Mother Edith Julia Paulsen
Birthplace U.S.
Laboratory Statement Monroe County Laboratories
Physician's Statement John Kraus, Fairport, N.Y.
Examination requirements none met
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form) _____
Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
Official _____ Profession _____ Witness _____
Period for solemnization of marriage begins at _____ on the _____ day of _____ 1956 and ends the _____ day of _____ 1956

Reported to State Com. Health 9/1/56
Mailed to State Dept. Health 9/5/56

City Perinton County Monroe STATE OF NEW YORK No. 35
Clerk Elizabeth E. Little

GROOM
Name Paul Herman Bird Color White
Residence 119 East Ave. E. Rochester, N.Y. Age 49 10/29/06
Occupation Asst. Foreman, N.Y.C. Dept. of Public Works
Birthplace Victory, N.Y.
Father Charles Fisher Bird
Birthplace U.S.
Mother Emma Jane Finch
Birthplace U.S.
Laboratory Statement Monroe Co. Laboratories
Physician's Statement Joseph J. Huber, E. Rochester, N.Y.
Examination requirements none met
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form) _____
Date: Affidavit July 25, 1956 License July 25, 1956 12:01 P. Marriage Aug. 4, 1956 5 P. Place of Marriage Rochester, N.Y.
Official James P. Frazier Profession Justice of the Peace Witness Ann Anderson, 72 Franklin St. Rochester, N.Y.
Period for solemnization of marriage begins at 12:01 P.M. on the 29 day of July 1956 and ends the 27 day of September 1956

BRIDE
Name Mary Bernice Maszgo Color White
Residence 110 Richmond Dr. Rochester, N.Y. Age 41 5/16/1915
Occupation Accountant
Birthplace Rochester, N.Y.
Father Cosmo Polignio
Birthplace Italy
Mother Marie Assunta Brina
Birthplace Italy
Laboratory Statement Strong Memorial Hospital
Physician's Statement E.R. Duggan, 16 W. Goodman St. Rochester, N.Y.
Examination requirements none met
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form) _____
Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
Official _____ Profession _____ Witness _____
Period for solemnization of marriage begins at _____ on the _____ day of _____ 1956 and ends the _____ day of _____ 1956

Reported to State Com. Health 9/1/56
Mailed to State Dept. Health 9/5/56

City Perinton County Monroe STATE OF NEW YORK No. 36
Clerk Elizabeth H. Pierce

GROOM
Name Joseph Terrone Color White
Residence 119 N. Main St., Fairport, N.Y. Age 37 7/12/19
Occupation Mechanics - Car Shop
Birthplace East Rochester, N.Y.
Father Frank Terrone
Birthplace Italy
Mother Angelina Mauro
Birthplace Italy
Laboratory Statement Monroe Co. Laboratories
Physician's Statement Dr. W. S. Eadsen, Fairport, N.Y.
Examination requirements none met
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form) _____
Date: Affidavit Aug. 18, 1956 License Aug. 18, 1956 11:24 A. Marriage Sept 1 1956 12 P. Place of Marriage East Rochester, N.Y.
Official Arthur F. Calmes Profession Catholic Priest Witness Claymond S. Buzenicki, 4125 Tomlinson Pkwy., Fairport, N.Y.
Period for solemnization of marriage begins at 11:24 A.M. on the 19 day of August 1956 and ends the 17 day of October 1956

BRIDE
Name Esther Viola Hambroch Color White
Residence 21 1/2 Land Park B., Fairport, N.Y. Age 37 4/20/19
Occupation at home
Birthplace Parsippany, N.J.
Father Georgian Williams Hambroch
Birthplace U.S.
Mother Laura Ruth Northrup
Birthplace U.S.
Laboratory Statement Monroe Co. Laboratories
Physician's Statement Dr. W. S. Eadsen, Fairport, N.Y.
Examination requirements none met
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form) _____
Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
Official _____ Profession _____ Witness _____
Period for solemnization of marriage begins at _____ on the _____ day of _____ 1956 and ends the _____ day of _____ 1956

RECORD OF MARRIAGES

Mailed to State Reported - State Com. Sept. 10 - Health 9/1/56.

City Perinton County Monroe STATE OF NEW YORK No. 37
 Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>Ralph William Hermans</u>	Color <u>White</u>	Name <u>Margaret Josephine Scarazzo</u>	Color <u>White</u>
Residence <u>129 Osborne St. Auburn N.Y.</u>	Age <u>35</u> <u>8-21-21</u>	Residence <u>53 Frank St. Fairport N.Y.</u>	Age <u>30</u> <u>10-16-25</u>
Occupation <u>Cotton Shoe Factory</u>	No. of marriage <u>1st</u>	Occupation <u>File Clerk - Camera Arts Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Baleton Parna</u>	Former wife or wives living or dead	Birthplace <u>Fairport N.Y.</u>	Former husband or husbands living or dead
Father <u>Anthony Hermans</u>	Divorced	Father <u>Bartano Scarazzo</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Carmella Fornica</u>	" where	Mother <u>Mary Divina Maraschini</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y. Date 8-21-56</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y. Date 8-21-56</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Carl Jacobson 10 East Canal St. Fairport N.Y. Date 8-16-56</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Carl Jacobson 10 East Canal St. Fairport N.Y. Date 8-16-56</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug. 25, 1956</u> License <u>Aug. 25, 11:04 AM</u> Marriage <u>Sept. 2, 10 AM</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Aug. 25, 1956</u> License <u>Aug. 25, 11:04 AM</u> Marriage <u>Sept. 2, 10 AM</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>John B. Gallagher</u> Profession <u>Priest</u>	Witness <u>Francis M. Bogan - 41 Jefferson St. Auburn N.Y.</u>	Official <u>John B. Gallagher</u> Profession <u>Priest</u>	Witness <u>Francis M. Bogan - 41 Jefferson St. Auburn N.Y.</u>
Period for solemnization of marriage begins at <u>11:04 A.M.</u> on the <u>26th</u> day of <u>August</u> 19 <u>56</u> and ends the <u>27th</u> day of <u>October</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>11:04 A.M.</u> on the <u>26th</u> day of <u>August</u> 19 <u>56</u> and ends the <u>27th</u> day of <u>October</u> 19 <u>56</u>	

Mailed to State Reported - State Com. Sept. 10 - Health 9/1/56.

City Perinton County Monroe STATE OF NEW YORK No. 38
 Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>Don Stewart Gillespie</u>	Color <u>White</u>	Name <u>Maria Anna Malcolm</u>	Color <u>White</u>
Residence <u>119 N. Main St. Fairport N.Y.</u>	Age <u>20</u> <u>6/2/36</u>	Residence <u>24 E. Sand Pt. Fairport N.Y.</u>	Age <u>19</u> <u>11/18/36</u>
Occupation <u>Comp. Home Swindle</u>	No. of marriage <u>1st</u>	Occupation <u>Club Tuggit</u>	No. of marriage <u>1st</u>
Birthplace <u>Chicago, Illinois</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Samuel Don Gillespie</u>	Divorced	Father <u>Eugene Sydney Malcolm</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Grace Elizabeth Shively</u>	" where	Mother <u>Jane Frances Barry</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y. Date 8-7-56</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y. Date 8-7-56</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Dr. M. C. Cochran 205 Main St. Fairport N.Y. Date 8-1-56</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Dr. M. C. Cochran 205 Main St. Fairport N.Y. Date 8-1-56</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by <u>Samuel D. Gillespie</u> Relation <u>Father</u> Date <u>8-22-56</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Grace S. Gillespie</u> Relation <u>Mother</u> Date <u>8-27-56</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Automobile driver's license</u> (Form)		Proof of age <u>Automobile driver's license</u> (Form)	
Date: Affidavit <u>Aug. 27, 1956</u> License <u>Aug. 27, 4:51 PM</u> Marriage <u>Sept. 1, 1956</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Aug. 27, 1956</u> License <u>Aug. 27, 4:51 PM</u> Marriage <u>Sept. 1, 1956</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Samuel P. Muller</u> Profession <u>Catholic Priest</u>	Witness <u>William Schwan - 57 State St. Fairport N.Y.</u>	Official <u>Samuel P. Muller</u> Profession <u>Catholic Priest</u>	Witness <u>William Schwan - 57 State St. Fairport N.Y.</u>
Period for solemnization of marriage begins at <u>4:51 P.M.</u> on the <u>28</u> day of <u>August</u> 19 <u>56</u> and ends the <u>26</u> day of <u>October</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>4:51 P.M.</u> on the <u>28</u> day of <u>August</u> 19 <u>56</u> and ends the <u>26</u> day of <u>October</u> 19 <u>56</u>	

Mailed to State Reported - State Com. Sept. 10 - Health 9/1/56.

City Perinton County Monroe STATE OF NEW YORK No. 39
 Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>Robert Charles Dodson</u>	Color <u>White</u>	Name <u>Mary Catherine Remington</u>	Color <u>White</u>
Residence <u>12 Terrace Drive Fairport N.Y.</u>	Age <u>21</u> <u>4/10/35</u>	Residence <u>22 Summit St. Fairport N.Y.</u>	Age <u>19</u> <u>8/16/37</u>
Occupation <u>B.D. - U.S. Coast Guard</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport N.Y.</u>	Former husband or husbands living or dead
Father <u>Stanley William Dodson</u>	Divorced	Father <u>Sylvester Hammond Remington</u>	Divorced
Birthplace <u>England</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Rosa Margaret Sutton</u>	" where	Mother <u>Marguerite Louella Eakin</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 8-21-56</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 8-24-56</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraus - 5 Main St. Fairport N.Y. Date 8-20-56</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraus - 5 Main St. Fairport N.Y. Date 8-19-56</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Automobile driver's license</u> (Form)		Proof of age <u>Automobile driver's license</u> (Form)	
Date: Affidavit <u>Aug. 28, 1956</u> License <u>Aug. 28, 12:54 PM</u> Marriage <u>Sept. 1, 1956</u> Place of Marriage <u>Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Aug. 28, 1956</u> License <u>Aug. 28, 12:54 PM</u> Marriage <u>Sept. 1, 1956</u> Place of Marriage <u>Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>John Kraus</u> Profession <u>Minister of the Gospel</u>	Witness <u>William F. Schwan - 25 Main St. Fairport N.Y.</u>	Official <u>John Kraus</u> Profession <u>Minister of the Gospel</u>	Witness <u>William F. Schwan - 25 Main St. Fairport N.Y.</u>
Period for solemnization of marriage begins at <u>12:54 P.M.</u> on the <u>29th</u> day of <u>August</u> 19 <u>56</u> and ends the <u>27th</u> day of <u>October</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>12:54 P.M.</u> on the <u>29th</u> day of <u>August</u> 19 <u>56</u> and ends the <u>27th</u> day of <u>October</u> 19 <u>56</u>	

RECORD OF MARRIAGES

Perinton - State Com. No. 101156
mailed 9/5 State Dept of Health 10/5/56
Perinton - State Com. No. 101156
mailed 9/5 State Dept of Health 10/5/56
Perinton - State Com. No. 101156
mailed 9/5 State Dept of Health 10/5/56

City Town Perinton County Monroe STATE OF NEW YORK No. 40
Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Robert Edward Baird</u>	Color <u>White</u>	Name <u>Josephine O'Hara</u>	Color <u>White</u>
Residence <u>90 Troup St. Rochester N.Y.</u>	Age <u>31 11/2/24</u>	Residence <u>57 S. Washington St. Rochester N.Y.</u>	Age <u>21 11/5/34</u>
Occupation <u>Assemblage Railway Signal</u>	No. of marriage <u>1st</u>	Occupation <u>Factory Work Optical Co</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>William Stearns</u>	Divorced	Father <u>Michael O'Hara</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Rochester N.Y.</u>	" when
Mother <u>Mary Theresa Guerin</u>	" where	Mother <u>Ellen Mc Nicholas</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Rochester N.Y.</u>	" against whom
Laboratory Statement <u>435 East Henrietta Rd. Rochester N.Y.</u> Date <u>Aug 15-56</u>		Laboratory Statement <u>435 East Henrietta Rd. Rochester N.Y.</u> Date <u>Aug 15-1956</u>	
Physician's Statement <u>Jason O. Cook - 112 South Ave. Rochester N.Y.</u> Date <u>Aug 14-56</u>		Physician's Statement <u>Jason O. Cook - 112 South Ave. Rochester N.Y.</u> Date <u>Aug 14-1956</u>	
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 1-1956</u> License <u>Sept 1 1956</u> 9:22 AM. Marriage <u>Sept 8-1956</u> 11:30 AM. Place of Marriage <u>Rochester N.Y.</u>		Date: Affidavit <u>Sept 1-1956</u> License <u>Sept 1 1956</u> 9:22 AM. Marriage <u>Sept 8-1956</u> 11:30 AM. Place of Marriage <u>Rochester N.Y.</u>	
Official <u>Frank J. Hurdelle</u> Profession <u>Catholic Priest</u>		Official <u>Frank J. Hurdelle</u> Profession <u>Catholic Priest</u>	
Witness <u>George Drake - 815 Nassau Ave. Rochester N.Y.</u>		Witness <u>George Drake - 815 Nassau Ave. Rochester N.Y.</u>	
Period for solemnization of marriage begins at <u>4:22 A.M.</u> on the <u>2nd</u> day of <u>September</u> 1956 and ends the <u>30th</u> day of <u>November</u> 1956		Period for solemnization of marriage begins at <u>4:22 A.M.</u> on the <u>2nd</u> day of <u>September</u> 1956 and ends the <u>30th</u> day of <u>November</u> 1956	

City Town Perinton County Monroe STATE OF NEW YORK No. 41
Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Thomas Rosenthal</u>	Color <u>White</u>	Name <u>Rosetta Marotta</u>	Color <u>White</u>
Residence <u>445 Sherman St. Rochester N.Y.</u>	Age <u>19 8/7/37</u>	Residence <u>445 Sherman St. Rochester N.Y.</u>	Age <u>17 1/12/39</u>
Occupation <u>Seaman - U.S. Navy</u>	No. of marriage <u>1st</u>	Occupation <u>Office Clerk - Furniture Store</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>George Rosenthal</u>	Divorced	Father <u>Salvatore Marotta</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Grace Harbin</u>	" where	Mother <u>Anna Grimaldi</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>44 Marshall St. Rochester N.Y.</u> Date <u>Sept 14-56</u>		Laboratory Statement <u>5 South St. Regis Drive</u> Date <u>Sept 12-56</u>	
Physician's Statement <u>W. Harold Warrant</u> Date <u>Sept 11-56</u>		Physician's Statement <u>Dr. Henrietta</u> Date <u>Sept 11-56</u>	
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by <u>Francine Rosenthal</u> Relation <u>Father</u> Date <u>Sept 10-56</u>		Consent by <u>Anna Marotta</u> Relation <u>Mother</u> Date <u>Sept 10-56</u>	
Consent by <u>Thomas Rosenthal</u> Relation <u>Mother</u> Date <u>Sept 10-56</u>		Consent by <u>Salvatore Marotta</u> Relation <u>Father</u> Date <u>Sept 10-56</u>	
Proof of age <u>Armed Forces of U.S. D. Card</u> (Form)		Proof of age <u>Baptismal Record</u> (Form)	
Date: Affidavit <u>Sept 15-1956</u> License <u>Sept 15-1956</u> 9:36 AM. Marriage <u>Sept 16-1956</u> 10:00 AM. Place of Marriage <u>Rochester N.Y.</u>		Date: Affidavit <u>Sept 15-1956</u> License <u>Sept 15-1956</u> 9:36 AM. Marriage <u>Sept 16-1956</u> 10:00 AM. Place of Marriage <u>Rochester N.Y.</u>	
Official <u>Frank J. Hurdelle</u> Profession <u>Judge of City Court</u>		Official <u>Frank J. Hurdelle</u> Profession <u>Judge of City Court</u>	
Witness <u>Salvatore Marotta - 445 Sherman St. Rochester N.Y.</u>		Witness <u>Salvatore Marotta - 445 Sherman St. Rochester N.Y.</u>	
Period for solemnization of marriage begins at <u>9:36 A.M.</u> on the <u>16th</u> day of <u>September</u> 1956 and ends the <u>14th</u> day of <u>November</u> 1956		Period for solemnization of marriage begins at <u>9:36 A.M.</u> on the <u>16th</u> day of <u>September</u> 1956 and ends the <u>14th</u> day of <u>November</u> 1956	

City Town Perinton County Monroe STATE OF NEW YORK No. 42
Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Samuel Clyde Bussey</u>	Color <u>W.</u>	Name <u>Mary Ann Taverite</u>	Color <u>W.</u>
Residence <u>222 East 30th St. East Rochester N.Y.</u>	Age <u>21 12/27/34</u>	Residence <u>412 Wilson Ave. East Rochester N.Y.</u>	Age <u>20 5/22/36</u>
Occupation <u>Agent - Insurance</u>	No. of marriage <u>1st</u>	Occupation <u>Clerical Worker Factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Tallahassee, Fla.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Sam James Bussey</u>	Divorced	Father <u>Joseph Taverite</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Madeline Irene Johnson</u>	" where	Mother <u>Mary La Pizzingrilli</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester N.Y.</u> Date <u>Sept 14-56</u>		Laboratory Statement <u>435 E. Henrietta Rd. Rochester N.Y.</u> Date <u>Sept 14-56</u>	
Physician's Statement <u>John Kraci S. Mani St. Fayette N.Y.</u> Date <u>Sept 14-56</u>		Physician's Statement <u>John Kraci S. Mani St. Fayette N.Y.</u> Date <u>Sept 14-56</u>	
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>Sept 18-1956</u> License <u>Sept 18-1956</u> 4:22 P.M. Marriage <u>Sept 27-1956</u> 12 P.M. Place of Marriage <u>East Rochester, N.Y.</u>		Date: Affidavit <u>Sept 18-1956</u> License <u>Sept 18-1956</u> 4:22 P.M. Marriage <u>Sept 27-1956</u> 12 P.M. Place of Marriage <u>East Rochester, N.Y.</u>	
Official <u>Arthur Peckham</u> Profession <u>Catholic Priest</u>		Official <u>Arthur Peckham</u> Profession <u>Catholic Priest</u>	
Witness <u>George O. B. St. Lawrence - 122 E. State St. Rochester N.Y.</u>		Witness <u>George O. B. St. Lawrence - 122 E. State St. Rochester N.Y.</u>	
Period for solemnization of marriage begins at <u>4:22 P.M.</u> on the <u>18th</u> day of <u>September</u> 1956 and ends the <u>17th</u> day of <u>November</u> 1956		Period for solemnization of marriage begins at <u>4:22 P.M.</u> on the <u>18th</u> day of <u>September</u> 1956 and ends the <u>17th</u> day of <u>November</u> 1956	

RECORD OF MARRIAGES

Reported to State Com. Health 10/11/56
minded to state Dept of Health 10/11/56
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City Perinton County Monroe STATE OF NEW YORK No. 43
Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Richard Martin Zisch</u> <small>(Full name)</small>	Color <u>W.</u>	Name <u>Catherine Joan Doyle</u> <small>(Full name)</small>	Color <u>W.</u>
Residence <u>95 Pitt Ave Fairport N.Y.</u>	Age <u>26, 5-10-1930</u>	Residence <u>75 Algine Drive Rochester N.Y.</u>	Age <u>25, 6-15-1931</u>
Occupation <u>Salesman, accounting mach.</u>	No. of marriage <u>1st</u> <small>Former wife or wives living or dead.</small>	Occupation <u>Therapist, U.S. Army</u>	No. of marriage <u>1st</u> <small>Former husband or husbands living or dead.</small>
Birthplace <u>Rochester N.Y.</u>	Divorced	Birthplace <u>Rochester N.Y.</u>	Divorced
Father <u>Frank Zisch</u> <small>(Name of)</small>	" when	Father <u>James Allan Doyle</u> <small>(Name of)</small>	" when
Birthplace <u>Germany</u>	" where	Birthplace <u>U.S.</u>	" where
Mother <u>Lillian Ellen Dennis</u> <small>(Maiden name of)</small>	" against whom	Mother <u>Sarah Ella Merrill</u> <small>(Maiden name of)</small>	" against whom
Birthplace <u>U.S.</u>		Birthplace <u>U.S.</u>	
Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>Sept. 18-56</u> <small>(Name and address of laboratory) (Test completed)</small>		Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>Sept. 18-56</u> <small>(Name and address of laboratory) (Test completed)</small>	
Physician's Statement <u>20 W. Church St. Fairport N.Y.</u> Date <u>Sept. 14-56</u> <small>(Name and address of physician) (Specimens taken)</small>		Physician's Statement <u>20 W. Church St. Fairport N.Y.</u> Date <u>Sept. 17-56</u> <small>(Name and address of physician) (Specimens taken)</small>	
Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>		Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	

Date: Affidavit Sept. 21-1956 License Sept. 21, 1956, 5:11 P.M. Marriage Oct. 6, 1956, 7:00 P.M. Place of Marriage Rittford N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official John A. Redington Profession Catholic Priest Witness Mr. William H. Malby, 30 Bobbing St. Rochester N.Y.
30 Monaca Ave. Rochester David S. Helms, 264 Alexander St. Rochester N.Y.
Period for solemnization of marriage begins at 2:11 P.M. on the 22 day of September 1956 and ends the 20 day of November 1956

City Perinton County Monroe STATE OF NEW YORK No. 44
Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Howard Alfred Williams</u> <small>(Full name)</small>	Color <u>W.</u>	Name <u>Mary Catherine Gray</u> <small>(Full name)</small>	Color <u>W.</u>
Residence <u>122 South Main St. Fairport N.Y.</u>	Age <u>62, 8-21-1914</u>	Residence <u>7 Babcock Street Fairport N.Y.</u>	Age <u>56, 5-18-1900</u>
Occupation <u>Foreman, Can Company</u>	No. of marriage <u>2nd</u> <small>Former wife or wives living or dead.</small>	Occupation <u>at home</u>	No. of marriage <u>2nd</u> <small>Former husband or husbands living or dead.</small>
Birthplace <u>Fairport N.Y.</u>	Divorced	Birthplace <u>Camdenburg N.Y.</u>	Divorced
Father <u>Richard Louis Williams</u> <small>(Name of)</small>	" when	Father <u>Frederick B. Parker</u> <small>(Name of)</small>	" when
Birthplace <u>U.S.</u>	" where	Birthplace <u>U.S.</u>	" where
Mother <u>Margaret Anna Varner</u> <small>(Maiden name of)</small>	" against whom	Mother <u>Fannie Elizabeth Wisnack</u> <small>(Maiden name of)</small>	" against whom
Birthplace <u>U.S.</u>		Birthplace <u>U.S.</u>	
Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>Sept. 21-56</u> <small>(Name and address of laboratory) (Test completed)</small>		Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>Sept. 18-56</u> <small>(Name and address of laboratory) (Test completed)</small>	
Physician's Statement <u>20 W. Church St. Fairport N.Y.</u> Date <u>Sept. 17-56</u> <small>(Name and address of physician) (Specimens taken)</small>		Physician's Statement <u>20 W. Church St. Fairport N.Y.</u> Date <u>Sept. 17-56</u> <small>(Name and address of physician) (Specimens taken)</small>	
Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>		Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	

Date: Affidavit Sept. 22-56 License Sept. 23, 1956, 11:40 A.M. Marriage Oct. 1, 1956, 7:00 P.M. Place of Marriage Fairport N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official Raymond P. Gray Profession Chapman Witness Margery J. Parker, 209, 3rd Colony Ave. Fairport N.Y.
19 East Church St. Fairport N.Y. W. Donald Williams, 5 Clinton St. Fairport N.Y.
Period for solemnization of marriage begins at 11:40 A.M. on the 23 day of September 1956 and ends the 21 day of November 1956

City Perinton County Monroe STATE OF NEW YORK No. 45
Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Wilfred Douglas Buckert</u> <small>(Full name)</small>	Color <u>W.</u>	Name <u>Theresa Mary Riggo</u> <small>(Full name)</small>	Color <u>W.</u>
Residence <u>200 Watson Rd. Fairport N.Y.</u>	Age <u>20, 11/18/35</u>	Residence <u>247 W. Myr Street East Rochester N.Y.</u>	Age <u>20, 8/12/36</u>
Occupation <u>Construction, Building</u>	No. of marriage <u>1st</u> <small>Former wife or wives living or dead.</small>	Occupation <u>Secretarial, Accounting</u>	No. of marriage <u>1st</u> <small>Former husband or husbands living or dead.</small>
Birthplace <u>Rochester N.Y.</u>	Divorced	Birthplace <u>Rochester N.Y.</u>	Divorced
Father <u>Wilfred Francis Buckert</u> <small>(Name of)</small>	" when	Father <u>Anthony Riggo</u> <small>(Name of)</small>	" when
Birthplace <u>U.S.</u>	" where	Birthplace <u>Italy</u>	" where
Mother <u>Nattie Laabilla Halpin</u> <small>(Maiden name of)</small>	" against whom	Mother <u>Josephine Sabini</u> <small>(Maiden name of)</small>	" against whom
Birthplace <u>U.S.</u>		Birthplace <u>U.S.</u>	
Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>Sept. 14-56</u> <small>(Name and address of laboratory) (Test completed)</small>		Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>Sept. 14-56</u> <small>(Name and address of laboratory) (Test completed)</small>	
Physician's Statement <u>Edwin Krademan</u> Date <u>Sept. 11-56</u> <small>(Name and address of physician) (Specimens taken)</small>		Physician's Statement <u>Edwin Krademan</u> Date <u>Sept. 11-56</u> <small>(Name and address of physician) (Specimens taken)</small>	
Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>		Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>	
Consent by <u>Nattie Buckert</u> Relation <u>Mother</u> Date <u>Sept. 25, 1956</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Wilfred F. Buckert</u> Relation <u>Father</u> Date <u>Sept. 25, 1956</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Auto Drivers License</u> (Form)		Proof of age <u>Smith record</u> (Form)	

Date: Affidavit Sept. 25-1956 License Sept. 25, 1956, 1:00 P.M. Marriage Sept. 29, 56, 11 A.M. Place of Marriage East Rochester N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official Raymond P. Gray Profession Catholic Priest Witness Vernon G. Mearns, 83 Waverly Ave. Rochester N.Y.
207 South Street East Rochester, N.Y. Stephanie Mearns, 216 Wadsworth St. Rochester, N.Y.
Period for solemnization of marriage begins at 6:07 P.M. on the 26th day of September 1956 and ends the 24th day of November 1956

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 46
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>James Alfred Cook</u>	Color <u>W</u>	Name <u>Marilyn June Jones</u>	Color <u>W</u>
Residence <u>119 1/2 W. Commercial St. E. Rochester N.Y.</u>	Age <u>22, 12-28-33</u>	Residence <u>70 Babylon Sea Fairport N.Y.</u>	Age <u>18, 2-13-38</u>
Occupation <u>Machine Operator, Filter Company</u>	No. of marriage <u>1st</u>	Occupation <u>Factory Worker, Gauge Factory</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>North Adams, Mass.</u>	Former husband or husbands living or dead
Father <u>John Anthony Cook</u>	Divorced	Father <u>Chester Elmer Jones</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Edith Mary Dean</u>	" where	Mother <u>Clara Jay Postman</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date Sept 28-56</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date Sept 28-56</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>20 W. Commercial St. Fairport N.Y. Date Sept 26-56</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>20 W. Commercial St. Fairport N.Y. Date Sept 26-56</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>was not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>was not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept. 29-1956</u> License <u>Sept. 29-1956</u> Marriage <u>Oct 1, 1956</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Sept. 29-1956</u> License <u>Sept. 29-1956</u> Marriage <u>Oct 1, 1956</u>	(Month) (Day) (Year) (Hour)
Official <u>Anton Gage</u> Profession <u>Clergyman</u>		Official <u>Anton Gage</u> Profession <u>Clergyman</u>	
Witness <u>John E. Cook - Fairport N.Y.</u>		Witness <u>John E. Cook - Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>3:22 P.M.</u> on the <u>30</u> day of <u>September</u> 19 <u>56</u> and ends the <u>28</u> day of <u>November</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>3:22 P.M.</u> on the <u>30</u> day of <u>September</u> 19 <u>56</u> and ends the <u>28</u> day of <u>November</u> 19 <u>56</u>	

Copied State Com. 10/15/56
 mailed to state Dept. of Health 10/15/56

City Perinton County Monroe STATE OF NEW YORK No. 47
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Bernard Thomas Hooley</u>	Color <u>White</u>	Name <u>Lyette Marie Demch</u>	Color <u>White</u>
Residence <u>15 Monroe St. Fairport N.Y.</u>	Age <u>24, 3-14-32</u>	Residence <u>213 W. Ellard St. East Rochester N.Y.</u>	Age <u>21, 9-9-35</u>
Occupation <u>Carpenter - Car Shop</u>	No. of marriage <u>1st</u>	Occupation <u>Office Worker - Insurance Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Leo Arthur Hooley</u>	Divorced	Father <u>Alex. John Demch</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>England</u>	" when
Mother <u>Oliver Blanche Smythom</u>	" where	Mother <u>Sybil Frances Russell</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Australia</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Rochester 20, N.Y. Date Oct 1-1956</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Rochester Health Bureau Rochester 20, N.Y. Date Oct 1-1956</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Charles B. Harris - 118 W. Ave. East Rochester N.Y. Date Sept 28-1956</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Charles B. Harris - 118 W. Ave. East Rochester N.Y. Date Sept 24-1956</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>was not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>was not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Oct 5-1956</u> License <u>Oct 3-1956</u> Marriage <u>Oct 6-1956</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Oct 5-1956</u> License <u>Oct 3-1956</u> Marriage <u>Oct 6-1956</u>	(Month) (Day) (Year) (Hour)
Official <u>John P. Wooten</u> Profession <u>Clergyman</u>		Official <u>John P. Wooten</u> Profession <u>Clergyman</u>	
Witness <u>William H. Rumbold - Fairport N.Y.</u>		Witness <u>William H. Rumbold - Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>4:27 P.M.</u> on the <u>4</u> day of <u>October</u> 19 <u>56</u> and ends the <u>2</u> day of <u>December</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>4:27 P.M.</u> on the <u>4</u> day of <u>October</u> 19 <u>56</u> and ends the <u>2</u> day of <u>December</u> 19 <u>56</u>	

Copied State Com. 11/15/56
 mailed to state Dept. of Health 11/15/56

City Perinton County Monroe STATE OF NEW YORK No. 48
 Clerk Ante M. Scully - Deputy

GROOM		BRIDE	
Name <u>Raymond Robert Hinkel</u>	Color <u>White</u>	Name <u>Janet Marie Johnston</u>	Color <u>White</u>
Residence <u>279 Arden Ave Rochester N.Y.</u>	Age <u>24, 11-22-31</u>	Residence <u>180 North Main St. Fairport N.Y.</u>	Age <u>23, 11-3-32</u>
Occupation <u>Assembler Telephone</u>	No. of marriage <u>1st</u>	Occupation <u>Assembler Telephone</u>	No. of marriage <u>1st</u>
Birthplace <u>Cohasset N.Y.</u>	Former wife or wives living or dead	Birthplace <u>East Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Charles Frederick Hinkel</u>	Divorced	Father <u>Clarence Arthur Johnston</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Canada</u>	" when
Mother <u>Emma Rose Mark</u>	" where	Mother <u>Helen Marie Nichols</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date Oct 2-1956</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date Oct 2-1956</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kaci - 84 South Main St. Fairport N.Y. Date Sept 29-1956</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>John Kaci - 84 South Main St. Fairport N.Y. Date Sept 29-1956</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>was not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>was not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Oct 15-1956</u> License <u>Oct 15-1956</u> Marriage <u>Oct 20-1956</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Oct 15-1956</u> License <u>Oct 15-1956</u> Marriage <u>Oct 20-1956</u>	(Month) (Day) (Year) (Hour)
Official <u>McLellan P. Nathan</u> Profession <u>Minister of the Gospel</u>		Official <u>McLellan P. Nathan</u> Profession <u>Minister of the Gospel</u>	
Witness <u>Donald A. Johnston - 1315 Fairport St. Fairport N.Y.</u>		Witness <u>Janet Johnston - 180 N. Main St. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>2:40 P.M.</u> on the <u>16</u> day of <u>October</u> 19 <u>56</u> and ends the <u>14</u> day of <u>December</u> 19 <u>56</u>		Period for solemnization of marriage begins at <u>2:40 P.M.</u> on the <u>16</u> day of <u>October</u> 19 <u>56</u> and ends the <u>14</u> day of <u>December</u> 19 <u>56</u>	

Copied State Com. 11/15/56
 mailed to state Dept. of Health 11/15/56

RECORD OF MARRIAGES

City Town Perinton County Monroe STATE OF NEW YORK No. 52
Clerk Elizabeth H. Pense

GROOM
Name Ronald Morrow Color White
Residence 920 Sherman Road Age 27, Nov 22 1929
Occupation Mechanic - Con Co. N.Y. No. of marriage 1st
Former wife or wives living or dead
Birthplace Wabster N.Y. Divorced
Father Ames Morrow " when
Birthplace U.S. " where
Mother Dorothy May Klave " against whom
Birthplace U.S.
Laboratory Monroe County Laboratory
Statement 435 E. Henrietta St. Rochester 10, N.Y. Date Oct 14 1956
Physician's Edwin Kriedman - Pittsford N.Y. Date Oct 15 1956
Statement Edwin Kriedman - Pittsford N.Y. Date Oct 15 1956
Examination requirements was not dispensed with by judge or justice
Consent by was not Relation Date
Consent by Relation Date
Proof of age (Form) X

BRIDE
Name Virginia Carmela Rosati Color White
Residence 330 E. Chestnut St. East Rochester N.Y. Age 23, Oct 21, 1933
Occupation At Home No. of marriage 1st
Former husband or husbands living or dead
Birthplace Brighton N.Y. Divorced
Father Angelo Rosati " when
Birthplace Italy " where
Mother Carmela Scorman " against whom
Birthplace Italy
Laboratory Monroe County Laboratory
Statement 435 E. Henrietta St. Rochester 10, N.Y. Date Oct 16 1956
Physician's Edwin Kriedman - Pittsford N.Y. Date Oct 15 1956
Statement Edwin Kriedman - Pittsford N.Y. Date Oct 15 1956
Examination requirements was not dispensed with by judge or justice
Consent by was not Relation Date
Consent by Relation Date
Proof of age (Form) X

Date: Affidavit Nov 3 1956 License Nov 3 1956 11:24 A.M. Marriage Nov 10 1956 11 A.M. Place of Marriage East Rochester N.Y.
Official Arthur F. Calmei Profession Catholic Priest Witness Joseph C. Pardo 920 Sherman Rd. Wabster N.Y.
Period for solemnization of marriage begins at 11:24 A.M. on the 10 day of November 1956 and ends the 2nd day of January 1957

City Town Perinton County Monroe STATE OF NEW YORK No. 53
Clerk Elizabeth H. Pense

GROOM
Name David Frederick DePuy Color White
Residence 15 East Church St. Fairport N.Y. Age 18, Apr 14 1938
Occupation Machin Operator - Con Co. No. of marriage 1st
Former wife or wives living or dead
Birthplace Rochester N.Y. Divorced
Father Cornelius W. DePuy " when
Birthplace U.S. " where
Mother Francis Marie Scholomate " against whom
Birthplace U.S.
Laboratory Monroe County Laboratory
Statement 435 E. Henrietta St. Rochester 20, N.Y. Date Oct 23 1956
Physician's John Kraai - Fairport N.Y. Date Oct 19 1956
Statement John Kraai - Fairport N.Y. Date Oct 19 1956
Examination requirements was not dispensed with by judge or justice
Consent by Cornelius W. DePuy Relation Father Date Nov 3 1956
Consent by Francis M. DePuy Relation Mother Date Nov 3 1956
Proof of age Birth Record (Form) X

BRIDE
Name Yvette Emille Marie Johnson Color White
Residence Macedon N.Y. Hook Road Age 18, Mar 31 1938
Occupation Machin Operator - Box Company No. of marriage 1st
Former husband or husbands living or dead
Birthplace Champlain N.Y. Divorced
Father Joseph Johnson " when
Birthplace Canada " where
Mother Rose Emma Sander " against whom
Birthplace U.S.
Laboratory Monroe County Laboratory
Statement 435 E. Henrietta St. Rochester 20, N.Y. Date Oct 23 1956
Physician's John Kraai - Fairport N.Y. Date Oct 18 1956
Statement John Kraai - Fairport N.Y. Date Oct 18 1956
Examination requirements was not dispensed with by judge or justice
Consent by was not Relation Date
Consent by Relation Date
Proof of age Birth Record (Form) X

Date: Affidavit Nov 3 1956 License Nov 3 1956 11:52 A.M. Marriage Nov 10 1956 11 A.M. Place of Marriage Macedon N.Y.
Official Benjamin S. Hanna Profession Roman Catholic Priest Witness Frank A. Scholomate - Fairport N.Y.
Period for solemnization of marriage begins at 11:52 A.M. on the 4 day of November 1956 and ends the 2 day of January 1957

City Town Perinton County Monroe STATE OF NEW YORK No. 54
Clerk Elizabeth H. Pense

GROOM
Name Mario Pataccoli Color White
Residence 110 W. Commercial St. East Rochester N.Y. Age 31, Aug 15 1925
Occupation Own Business - Store No. of marriage 1st
Former wife or wives living or dead
Birthplace East Rochester N.Y. Divorced
Father John Pataccoli " when
Birthplace Italy " where
Mother Theresa Patoni " against whom
Birthplace Italy
Laboratory Monroe County Laboratory
Statement 435 E. Henrietta St. Rochester 20, N.Y. Date Nov 7 1956
Physician's Joseph J. Haber - East Rochester N.Y. Date Nov 5 1956
Statement Joseph J. Haber - East Rochester N.Y. Date Nov 5 1956
Examination requirements was not dispensed with by judge or justice
Consent by was not Relation Date
Consent by Relation Date
Proof of age (Form) X

BRIDE
Name Joseph Theresa Sando Color White
Residence 210 Main St. East Rochester N.Y. Age 25, May 1 1931
Occupation Secretary - Hannan Co No. of marriage 1st
Former husband or husbands living or dead
Birthplace Brighton, N.Y. Divorced
Father Edward E. Sando " when
Birthplace U.S. " where
Mother Theresa Emma Rivera " against whom
Birthplace U.S.
Laboratory Monroe County Laboratory
Statement 435 E. Henrietta St. Rochester 20, N.Y. Date Nov 7 1956
Physician's Joseph J. Haber - East Rochester N.Y. Date Nov 5 1956
Statement Joseph J. Haber - East Rochester N.Y. Date Nov 5 1956
Examination requirements was not dispensed with by judge or justice
Consent by was not Relation Date
Consent by Relation Date
Proof of age (Form) X

Date: Affidavit Nov 7 1956 License Nov 7 1956 4:38 P. Marriage Nov 10 1956 10 A.M. Place of Marriage East Rochester N.Y.
Official Arthur Calmei Profession Catholic Priest Witness Mario Pataccoli - 110 W. Commercial St. East Rochester N.Y.
Period for solemnization of marriage begins at 4:38 P.M. on the 8 day of November 1956 and ends the 6 day of January 1957

mailed to state Dept of Health 12/11/56
mailed to state Dept of Health 12/16/56
mailed to state Dept of Health 12/11/56
mailed to state Dept of Health 12/11/56
mailed to state Dept of Health 12/11/56

RECORD OF MARRIAGES

City Saints County Monroe STATE OF NEW YORK No. 55

Clerk Elizabeth H. Sarna
GROOM

Name Richard George Knibbe Color White
 Residence 96 Seneca St. Fairport N.Y. Age 17, Oct. 13-1939
 Occupation Carpenter Building No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father Willard James Knibbe Divorced
 Birthplace U.S. " when
 Mother Pauline Olga McCormick " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories
435 E. Henrietta St. Rochester 20, N.Y. Date Nov. 7-1956 (Test completed)
 Physician's Statement Eric Gorfman 10 E. Church St. Fairport N.Y. Date Nov. 5-1956 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by Pauline A. Knibbe Relation Mother Date Nov. 16-1956
 Consent by Willard G. Knibbe Relation Father Date Nov. 16-1956
 Proof of age Automobile Driver's License (Form) X
 Date: Affidavit Nov. 10-1956 License Nov. 10-1956 10:40 A.M. Marriage Nov. 17-1956 11:00 P.M. Place of Marriage Saints Rochester N.Y.
 Official John E. Weston Profession Clergyman Witness Joseph Pansel 220 East Main St. Fairport N.Y.
21 West Ave. Fairport N.Y. Period for solemnization of marriage begins at 10:14 A.M. on the 11 day of November 1956 and ends the 9 day of January 1957

BRIDE

Name Joelene Anne Gilbert Color White
 Residence 138 West Ave. East Rochester N.Y. Age 18, Aug. 9-1938
 Occupation At home No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father Howard Daniel Gilbert Divorced
 Birthplace U.S. " when
 Mother Pauline Josephine Artlip " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories
435 E. Henrietta St. Rochester 20, N.Y. Date Nov. 9-1956 (Test completed)
 Physician's Statement Eric Gorfman 10 E. Church St. Fairport N.Y. Date Oct. 30-1956 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form) _____
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1956 and ends the _____ day of _____ 1957

mailed to state Dept of Health 12/16/56
 mailed to state Dept of Health 12/16/56
 mailed to state Dept of Health 12/16/56
 mailed to state Dept of Health 12/16/56
 mailed to state Dept of Health 12/16/56

City Saints County Monroe STATE OF NEW YORK No. 56

Clerk Elizabeth H. Sarna
GROOM

Name Benjamin Henry Scheid Color White
 Residence 111 Broadway Ave. Fairport Age 37, July 18-1902
 Occupation Carpenter Building Contractor No. of marriage 1st
 Birthplace Silver Lake, Minn. Former wife or wives living or dead
 Father George S. Scheid Divorced
 Birthplace Cochran, Ohio " when
 Mother Janis Karstank " where
 Birthplace Cochran, Ohio " against whom
 Laboratory Statement Monroe County Laboratories
435 E. Henrietta St. Rochester 20, N.Y. Date Nov. 14-56 (Test completed)
 Physician's Statement William S. Boshart Fairport N.Y. Date Nov. 14-56 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form) X
 Date: Affidavit Nov. 19-1956 License Nov. 19-1956 7:51 P.M. Marriage Nov. 21-1956 7:12 P.M. Place of Marriage Fairport N.Y.
 Official George M. W. Davis Profession Clergyman Witness Osse Wilda 74 Middle St. Fairport N.Y.
14 Seneca Ave. Fairport Period for solemnization of marriage begins at 7:51 P.M. on the 20 day of November 1956 and ends the 18 day of January 1957

BRIDE

Name Rita Calia Haskell Color White
 Residence 140 West Ave. Fairport N.Y. Age 53, Aug. 22-1903
 Occupation Carlina, Mabel No. of marriage 2nd
 Birthplace Victor, N.Y. Former husband or husbands living or dead dead
 Father William Park Divorced
 Birthplace U.S. " when
 Mother Stella Wilson " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories
435 E. Henrietta St. Rochester 20, N.Y. Date Nov. 16-56 (Test completed)
 Physician's Statement William S. Boshart Fairport N.Y. Date Nov. 14-56 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form) _____
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1956 and ends the _____ day of _____ 1957

City Saints County Monroe STATE OF NEW YORK No. 57

Clerk Elizabeth H. Sarna
GROOM

Name Harold George Rowe Color White
 Residence Madison St. Fairport Age 40, Aug. 6-1916
 Occupation Oil Break - New York Central No. of marriage 1st
 Birthplace East Rochester N.Y. Former wife or wives living or dead
 Father George William Rowe Divorced
 Birthplace U.S. " when
 Mother Caroline De Witt " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories
435 E. Henrietta St. Rochester 20, N.Y. Date Nov. 16-1956 (Test completed)
 Physician's Statement John Kraai - Fairport N.Y. Date Nov. 12-1956 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form) X
 Date: Affidavit Nov. 23-1956 License Nov. 23-1956 4:23 P.M. Marriage Dec. 1-1956 2 P.M. Place of Marriage Fairport N.Y.
 Official George M. W. Davis Profession Clergyman Witness Osse Wilda 74 Middle St. Fairport N.Y.
14 Seneca Ave. Fairport N.Y. Period for solemnization of marriage begins at 4:23 P.M. on the 24 day of November 1956 and ends the 22 day of January 1957

BRIDE

Name Virginia Mae Cuyart Color White
 Residence 46 South Ave. Fairport N.Y. Age 25, May 8-1931
 Occupation Rose Parker - Harts Three Home No. of marriage 1st
 Birthplace Pittsburgh Pa. Former husband or husbands living or dead
 Father Arthur Simpson Cuyart Divorced
 Birthplace U.S. " when
 Mother Mary Estelita Ritter " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories
435 E. Henrietta St. Rochester 20, N.Y. Date Nov. 16-1956 (Test completed)
 Physician's Statement John Kraai - Fairport N.Y. Date Nov. 12-1956 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form) _____
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1956 and ends the _____ day of _____ 1957

RECORD OF MARRIAGES

Reported State Com. Health 1/5/57
mailed to State Dept of Health 1/5/57
mailed to State Dept of Health 1/5/57
Reported State Com. Health 2/1/57
mailed to State Dept of Health 2/1/57

City Perinton County Monroe STATE OF NEW YORK No. 58
Clerk Elizabeth H. France

GROOM

BRIDE

Name Harold A. Hofa Color White
Residence 1802 9th St. Fairfield N.Y. Age 53 Aug. 29, 1903
Occupation Automobile Salesman No. of marriage 1st
Former wife or wives living or dead.
Birthplace Fairfield N.Y. Divorced
Father John Frederick Hofa (Name of)
Birthplace U.S. " when
Mother Anna Schaefferberger (Maiden name of)
Birthplace Switzerland " where
" against whom
Laboratory Statement Monroe County Sabotaria Date 12-18-56
(Name and address of laboratory) (Test completed)
Physician's Statement William S. Smith Date 12-10-56
(Name and address of physician) (Specimens taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Name Helen Josephine Hodge Color White
Residence 34 Rowden Ave. Fairport N.Y. Age 42 Sep. 27-14
Occupation Teacher - High School No. of marriage 1st
Former husband or husbands living or dead.
Birthplace Geneva, New York Divorced
Father Richard Duane Hodge (Name of)
Birthplace Canada " when
Mother Mabel Ella Clark (Maiden name of)
Birthplace U.S. " where
" against whom
Laboratory Statement Monroe County Sabotaria Date 12-11-56
(Name and address of laboratory) (Test completed)
Physician's Statement William S. Smith Date 12-10-56
(Name and address of physician) (Specimens taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Date: Affidavit Dec. 18-1956 License Dec. 19-56-4:38 P.M. Marriage Dec. 20-56-1:09 P.M. Place of Marriage Geneva N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Witness) Car M. Mavin - Fairfield N.Y.
Official William S. Smith Profession Clergyman Witness Muriel Hodge - Northport Pa.
Period for solemnization of marriage begins at 4:38 P.M. on the 19 day of December 1956 and ends the 17 day of February 1957

City Perinton County Monroe STATE OF NEW YORK No. 59
Clerk Elizabeth H. France

GROOM

BRIDE

Name Bradley Deuel Color White
Residence 216 46th St. Fairport N.Y. Age 24 Aug. 14-1932
Occupation Milwaukee St. Roadway No. of marriage 2nd
Former wife or wives living or dead. Living
Birthplace Geneva, N.Y. Divorced Yes
Father Charles Deuel (Name of)
Birthplace U.S. " when Oct. 11-1905
Mother Helen Alice Tester (Maiden name of)
Birthplace U.S. " where City of Chicago
" against whom Geneva
Laboratory Statement Monroe County Sabotaria Date 12-26-56
(Name and address of laboratory) (Test completed)
Physician's Statement John K. Kiser Date 12-22-56
(Name and address of physician) (Specimens taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Name Janice Lee Bryan Color White
Residence 314 East 5th St. East Rochester N.Y. Age 17 Feb. 22-1939
Occupation At Home No. of marriage 1st
Former husband or husbands living or dead.
Birthplace Rochester N.Y. Divorced
Father Home Charles Bryan (Name of)
Birthplace U.S. " when
Mother Marjorie Mary Deane (Maiden name of)
Birthplace U.S. " where
" against whom
Laboratory Statement Monroe County Sabotaria Date 12-26-56
(Name and address of laboratory) (Test completed)
Physician's Statement John K. Kiser Date 12-22-56
(Name and address of physician) (Specimens taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation Father Date 12-27-56
Consent by _____ Relation Mother Date 12-27-56
Proof of age _____ (Form)

Date: Affidavit Dec. 27-1956 License Dec. 27-56-11:22 A.M. Marriage Dec. 29-56-7:00 P.M. Place of Marriage Fairport N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Witness) Richard Deuel - 250 H. St. Fairport N.Y.
Official Clifford St. Fairport N.Y. Profession Clergyman Witness James George - 400 N. Smith St. Fairport N.Y.
Period for solemnization of marriage begins at 11:22 A.M. on the 28 day of December 1956 and ends the 26 day of February 1957

City Perinton County Monroe STATE OF NEW YORK No. 60
Clerk Elizabeth H. France

GROOM

BRIDE

Name Anthony James Marini Color White
Residence 700 Empire Blvd. Randolph Age 23 Aug. 6-1934
Occupation Maintenance, Kodak No. of marriage 1st
Former wife or wives living or dead.
Birthplace Buffalo N.Y. Divorced
Father James Marini (Name of)
Birthplace Italy " when
Mother Rose Addi (Maiden name of)
Birthplace U.S. " where
" against whom
Laboratory Statement Paul H. Heltz Bureau Lab. Date 12-20-56
(Name and address of laboratory) (Test completed)
Physician's Statement James P. Conti Date 12-17-56
(Name and address of physician) (Specimens taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Name Josephine Carmella Bony Color White
Residence 221 East Ave. East Rochester N.Y. Age 21 April 8-1935
Occupation allegations, Kodak No. of marriage 1st
Former husband or husbands living or dead.
Birthplace Manhatten N.Y. Divorced
Father Joseph Bony (Name of)
Birthplace U.S. " when
Mother Millie Bony (Maiden name of)
Birthplace Italy " where
" against whom
Laboratory Statement Paul H. Heltz Bureau Lab. Date 12-20-56
(Name and address of laboratory) (Test completed)
Physician's Statement James P. Conti Date 12-17-56
(Name and address of physician) (Specimens taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Date: Affidavit Dec. 28-1956 License Dec. 28-56-4:23 P.M. Marriage Jan. 0-1957-10:00 A.M. Place of Marriage East Rochester
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Witness) Marjorie Ann Bony - 221 East Ave. East Rochester N.Y.
Official Anthony Coleman Profession Catholic Priest Witness James P. Conti
Period for solemnization of marriage begins at 4:23 P.M. on the 29 day of Dec 1956 and ends the 27 day of February 1957

RECORD OF MARRIAGES

Supplied State Com
Hester 2/11/57

mailed to State Dept of Health
Hester 2/15/57

Supplied State Com
Hester 2/11/57

mailed to State Dept of Health
Hester 2/15/57

(ECKEL)

Supplied State Com
Hester 2/11/57

mailed to State Dept of Health
Hester 2/15/57

City Perinton County Monroe STATE OF NEW YORK No. 1
 Clerk Elizabeth H. Science

GROOM		BRIDE	
Name <u>Robert Bernhard Ruben</u>	Color <u>White</u>	Name <u>Anita Rosa Hafatetter</u>	Color <u>White</u>
Residence <u>172 Garrison Ave Fairport</u>	Age <u>29, Feb 2-1927</u>	Residence <u>916 1/2 Fairport-Walton Rd. Canfield N.Y.</u>	Age <u>18, Nov 15-1938</u>
Occupation <u>Supervisor - Small Arms Co.</u>	No. of marriage <u>1st</u>	Occupation <u>office woker - Small Arms Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Robert Joseph Rubsam</u>	Divorced	Father <u>Herman Christian Hafatetter</u>	Divorced
Birthplace <u>Bermain</u>	" when	Birthplace <u>Bermain</u>	" when
Mother <u>Rosa Roth</u>	" where	Mother <u>Elizabeth Helena Parbath</u>	" where
Birthplace <u>Bermain</u>	" against whom	Birthplace <u>Bermain</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 1-2-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 1-2-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>10 East Church Fairport N.Y. Date 1-2-27-56</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>10 East Church Fairport N.Y. Date 1-2-27-56</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Jan 4-1957</u> License <u>Jan 4-1957-4:10P</u> Marriage <u>Jan 11-1957-2:30P</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Jan 4-1957</u> License <u>Jan 4-1957-4:10P</u> Marriage <u>Jan 11-1957-2:30P</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Raymond Davis Fairport N.Y.</u> Profession <u>Deputy</u>	Witness <u>Shirley G. Allen 3317 Lake Ave. Rochester N.Y.</u>	Official <u>Raymond Davis Fairport N.Y.</u> Profession <u>Deputy</u>	Witness <u>Shirley G. Allen 3317 Lake Ave. Rochester N.Y.</u>
Period for solemnization of marriage begins at <u>4:17P</u> M. on the <u>5</u> day of <u>January</u> 1957 and ends the <u>3</u> day of <u>March</u> 1957		Period for solemnization of marriage begins at <u>4:17P</u> M. on the <u>5</u> day of <u>January</u> 1957 and ends the <u>3</u> day of <u>March</u> 1957	
City <u>Perinton</u> County <u>Monroe</u> STATE OF NEW YORK No. <u>2</u>		City <u>Perinton</u> County <u>Monroe</u> STATE OF NEW YORK No. <u>2</u>	
Clerk <u>Elizabeth M. Rowley</u>		Clerk <u>Elizabeth M. Rowley</u>	

GROOM		BRIDE	
Name <u>Ralph Ivan Russell</u>	Color <u>White</u>	Name <u>Heraldine Sue May</u>	Color <u>White</u>
Residence <u>Byron St. - Marion N.Y.</u>	Age <u>22, Oct 10-1934</u>	Residence <u>26 East St. Fairport N.Y.</u>	Age <u>17, Aug 22-1939</u>
Occupation <u>Bus Station J & J Gas Station</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Ontario N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Garret Russell</u>	Divorced	Father <u>Walter Joseph May</u>	Divorced
Birthplace <u>Holland</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Elizabeth Goldschlager</u>	" where	Mother <u>Ella Mildred Bueg</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 1-4-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 1-4-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kucari, S. Main St. Fairport N.Y. Date 1-2-31-56</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kucari, S. Main St. Fairport N.Y. Date 1-2-31-56</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by <u>Ella Mildred Bueg May</u> Relation <u>Mother</u> Date <u>Jan 9-1957</u>	
Consent by _____ Relation _____ Date _____		Consent by <u>Walter Joseph May</u> Relation <u>Father</u> Date <u>Jan 9-1957</u>	
Proof of age <u>Certified copy of birth record</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>Jan 9-1957</u> License <u>Jan 9-1957-9:20A</u> Marriage <u>Jan 12-1957-1:30P</u> Place of Marriage <u>Walton N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Jan 9-1957</u> License <u>Jan 9-1957-9:20A</u> Marriage <u>Jan 12-1957-1:30P</u> Place of Marriage <u>Walton N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Raymond Davis Fairport N.Y.</u> Profession <u>Deputy</u>	Witness <u>Raymond Davis, Jr. 3308 St. Sodus N.Y.</u>	Official <u>Raymond Davis Fairport N.Y.</u> Profession <u>Deputy</u>	Witness <u>Raymond Davis, Jr. 3308 St. Sodus N.Y.</u>
Period for solemnization of marriage begins at <u>9:22 A.M.</u> on the <u>10</u> day of <u>January</u> 1957 and ends the <u>8</u> day of <u>March</u> 1957		Period for solemnization of marriage begins at <u>9:22 A.M.</u> on the <u>10</u> day of <u>January</u> 1957 and ends the <u>8</u> day of <u>March</u> 1957	
City <u>Perinton</u> County <u>Monroe</u> STATE OF NEW YORK No. <u>3</u>		City <u>Perinton</u> County <u>Monroe</u> STATE OF NEW YORK No. <u>3</u>	
Clerk <u>Elizabeth M. Rowley</u>		Clerk <u>Elizabeth M. Rowley</u>	

GROOM		BRIDE	
Name <u>Harry Ross Spencer</u>	Color <u>White</u>	Name <u>Dorothy Viola Clevenger</u>	Color <u>White</u>
Residence <u>21 Durant St. Fairport N.Y.</u>	Age <u>22, Dec 13-1934</u>	Residence <u>1843 Canfield St. Canfield N.Y.</u>	Age <u>16</u>
Occupation <u>Stock Clerk - Wilson Works</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>East Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>East Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Rayman Frank Spencer</u>	Divorced	Father <u>Andrew James Clevenger</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Eula Warner</u>	" where	Mother <u>Ethel Beatrice Robinson</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 1-8-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 1-8-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>William S. Smith Fairport N.Y. Date 1-4-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>20 West Church St. Fairport N.Y. Date 1-4-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by <u>Ethel B. Clevenger</u> Relation <u>Mother</u> Date <u>1-12-57</u>	
Consent by _____ Relation _____ Date _____		Consent by <u>Andrew J. Clevenger</u> Relation <u>Father</u> Date <u>1-12-57</u>	
Proof of age _____ (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>Jan 12-1957</u> License <u>Jan 12-1957-2:30P</u> Marriage <u>Jan 13-1957-2:30P</u> Place of Marriage <u>Canfield N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Jan 12-1957</u> License <u>Jan 12-1957-2:30P</u> Marriage <u>Jan 13-1957-2:30P</u> Place of Marriage <u>Canfield N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Raymond Davis Fairport N.Y.</u> Profession <u>Monk</u>	Witness <u>Mr. Fay Spencer 29 Tallies Rd. Newark N.Y.</u>	Official <u>Raymond Davis Fairport N.Y.</u> Profession <u>Monk</u>	Witness <u>Mr. Fay Spencer 29 Tallies Rd. Newark N.Y.</u>
Period for solemnization of marriage begins at <u>9:31 A.M.</u> on the <u>13</u> day of <u>January</u> 1957 and ends the <u>11</u> day of <u>March</u> 1957		Period for solemnization of marriage begins at <u>9:31 A.M.</u> on the <u>13</u> day of <u>January</u> 1957 and ends the <u>11</u> day of <u>March</u> 1957	
City <u>Perinton</u> County <u>Monroe</u> STATE OF NEW YORK No. <u>3</u>		City <u>Perinton</u> County <u>Monroe</u> STATE OF NEW YORK No. <u>3</u>	
Clerk <u>Elizabeth M. Rowley</u>		Clerk <u>Elizabeth M. Rowley</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 4
Clerk Elizabeth H. Pierson

Form for marriage record No. 4. Groom: Newell W. Bernard, 58 West Ave. Fairport N.Y. Bride: Berna Margaret Basile, 132 North Main St. Fairport N.Y. Date: Jan 15-57.

Registered State Com. Health 2/11/57
mailed to State Dept. of Health 2/15/57

City Perinton County Monroe STATE OF NEW YORK No. 5
Clerk Elizabeth H. Pierson

Form for marriage record No. 5. Groom: Thomas William Ganta, 825 Nevada N.Y. Bride: Shirley Mae Gama, 173 Williams St. Palmyra N.Y. Date: Jan 16-1957.

Registered State Com. Health 2/11/57
mailed to State Dept. of Health 2/15/57

City Perinton County Monroe STATE OF NEW YORK No. 6
Clerk Elizabeth H. Pierson

Form for marriage record No. 6. Groom: Frank Raymond Bugenstein, 105 Church St. Victor N.Y. Bride: Joyce Eleanor Matthews, 1424 Pittsford Victor N.Y. Date: Jan 28-1957.

Registered State Com. Health 2/11/57
mailed to State Dept. of Health 2/15/57

RECORD OF MARRIAGES

117

mailed to state pd. of Health 3/5/57

City Perinton County Monroe STATE OF NEW YORK No. 7
Clerk Ruth M. Boudley

GROOM

Name James Edward Casella Color White
 Residence 1256 Airport Rd. Fairport, N.Y. Age 22 Sept. 28-1937
 Occupation Farmer No. of marriage 1st
 Birthplace Rochester, N.Y. Former wife or wives living or dead
 Father John Casella Divorced
 Birthplace Italy " when
 Mother Mary Marie Pace " where
 Birthplace Italy " against whom
 Laboratory Statement Rochester Health Bureau Lab. Rochester, N.Y. Date Jan 28-1957
 Physician's Statement 378 Portland Ave. Rochester, N.Y. Date Jan 20-1957
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Roslyn Cynthia Childs Color White
 Residence 4 Edith St. East Rochester, N.Y. Age 18 Jan. 13-1939
 Occupation at home No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead
 Father Kenneth E. Childs Divorced
 Birthplace U.S. " when
 Mother Cynthia Marie Morris " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau Lab. Rochester, N.Y. Date Jan 28-1957
 Physician's Statement 378 Portland Ave. Rochester, N.Y. Date Jan 20-1957
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit Feb. 6-1957 License Feb. 6-1957 Marriage Feb. 9-1957 10 A.M. Place of Marriage East Rochester, N.Y.
 Official Arthur Calmeri Profession Catholic Priest Witness John W. Casella - 205 Washington St. East Rochester, N.Y.
 Period for solemnization of marriage begins at 9:16 A.M. on the 7 day of February 1957 and ends the 5 day of April 1957

City Perinton County Monroe STATE OF NEW YORK No. 8
Clerk Elizabeth H. Pansa

mailed to state pd. of Health 3/5/57

GROOM

Name Norman Russell Drew Color White
 Residence 4624 Centre Rd. Fairport, N.Y. Age 22 April 11-1937
 Occupation Printer, Box Company No. of marriage 1st
 Birthplace Rochester, N.Y. Former wife or wives living or dead
 Father Maynard Russell Drew Divorced
 Birthplace U.S. " when
 Mother Honora Ada Butler " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau Lab. Rochester, N.Y. Date Feb. 1-1957
 Physician's Statement 660 Amatt Blvd. Rochester, N.Y. Date Jan 30-1957
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Certified copy of a birth record (Form)

BRIDE

Name Joan Della DuVal Color White
 Residence 2002 Brighton - Henrietta Town Age 18 Feb. 11-1939
 Occupation at home No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead
 Father Reginald DuVal Divorced
 Birthplace Canada " when
 Mother Dorothy Rankin " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau Lab. Rochester, N.Y. Date Feb. 1-1957
 Physician's Statement 660 Amatt Blvd. Rochester, N.Y. Date Jan 30-1957
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Certified copy of a birth record (Form)

Date: Affidavit Feb. 11-1957 License Feb. 11-1957 Marriage Feb. 15-1957 7:30 P.M. Place of Marriage Fairport, N.Y.
 Official Samuel W. Davis Profession Clergyman Witness John Mayer - 1972 East Olive Rd. Rochester, N.Y.
 Period for solemnization of marriage begins at 12:14 P.M. on the 12 day of February 1957 and ends the 10 day of April 1957

City Perinton County Monroe STATE OF NEW YORK No. 9
Clerk Elizabeth H. Pansa

mailed to state pd. of Health 3/5/57

GROOM

Name Harold Floyd Siefert Color White
 Residence 112 Boulevard Ave. Fairport, N.Y. Age 24 Dec. 11-1932
 Occupation Truck Driver, Machine Co. No. of marriage 1st
 Birthplace Perinton, New York Former wife or wives living or dead
 Father Charles Aquino Siefert Divorced
 Birthplace U.S. " when
 Mother Elda May Siffle " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta Rd. Rochester, N.Y. Date Feb. 5-57
 Physician's Statement South Main St. Fairport, N.Y. Date Feb. 3-57
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Edith Ruth Tracy Color White
 Residence 112 Boulevard Ave. Fairport, N.Y. Age 18 July 7-1938
 Occupation Assembly, Manufacture of gages No. of marriage 1st
 Birthplace Geneva, New York Former husband or husbands living or dead
 Father Samuel Wallace Tracy Divorced
 Birthplace U.S. " when
 Mother Hazel Doris Sherman " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories 435 E. Henrietta Rd. Rochester, N.Y. Date Feb. 5-1957
 Physician's Statement South Main St. Fairport, N.Y. Date Feb. 3-1957
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Certified copy of a birth record (Form)

Date: Affidavit Feb. 26-1957 License Feb. 26-1957 Marriage March 2-1957 2:00 P.M. Place of Marriage Fairport, N.Y.
 Official Donald S. Reddy Profession Catholic Clergyman Witness Robert Albrecht - 465 Adams St. Fairport, N.Y.
 Period for solemnization of marriage begins at 5:26 P.M. on the 27 day of February 1957 and ends the 25 day of April 1957

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 10
Clerk Elizabeth H. Pears

GROOM
Name Charles Herman Koff, Jr. Color White
Residence 144 Paris Ave. Fairport N.Y. Age 30, Mar. 19-1926
Occupation Mechanic Automobile No. of marriage 2nd
Former wife or wives living or dead Dead
Birthplace Clyde, Ohio
Father Charles Herman Koff, Sr. Divorced
Birthplace U.S. " when
Mother Grace Mae White " where
Birthplace U.S. " against whom
Laboratory Monroe County Laboratories
Statement 435 E. Henrietta Rd. Rochester 20, N.Y. Date Mar. 16-1957
Physician's H.P. Madatt-82 West Ave. Fairport N.Y. Date Mar. 5-1957
Statement H.P. Madatt-82 West Ave. Fairport N.Y. Date Mar. 5-1957
Examination requirements Were not dispensed with by judge or justice
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

BRIDE
Name Glorance Francis Rubelty Color White
Residence 32 Paris Ave. Fairport N.Y. Age 45, Nov. 7-1911
Occupation at home No. of marriage 2nd
Former husband or husbands living or dead Dead
Birthplace Perinton, New York
Father George Henry Minnaman Divorced
Birthplace U.S. " when
Mother Mary Ann Kingalay " where
Birthplace U.S. " against whom
Laboratory Monroe County Laboratories
Statement 435 E. Henrietta Rd. Rochester 20, N.Y. Date Mar. 6-1957
Physician's H.P. Madatt-82 West Ave. Fairport N.Y. Date Mar. 5-1957
Statement H.P. Madatt-82 West Ave. Fairport N.Y. Date Mar. 5-1957
Examination requirements Were not dispensed with by judge or justice
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Date: Affidavit March 16-1957 License March 6-1957 11:35A Marriage March 8-1957 7:00P.M. Place of Marriage Fairport N.Y.
Official Donald B. Gosholt (Month) (Day) (Year) (Hour) William Camard-Hillstone St. Fairport N.Y.
Official 42 Seneca St. Fairport N.Y. Profession Lutheran Clergyman Witness William Camard-Hillstone St. Fairport N.Y.
Period for solemnization of marriage begins at 11:25A.M. on the 8 day of March 1957 and ends the 6 day of May 1957

City Perinton County Monroe STATE OF NEW YORK No. 11
Clerk Elizabeth H. Pears

GROOM
Name Joseph Benedict Hanley Color White
Residence 90 Colver Rd. Rochester N.Y. Age 23, July 5-1933
Occupation Chemist - Hospital No. of marriage 1st
Former wife or wives living or dead _____
Birthplace Staten Island, New York
Father Joseph Benedict Hanley Divorced
Birthplace Ireland " when
Mother Sarah Manning " where
Birthplace Ireland " against whom
Laboratory St. Vincent Memorial Hospital
Statement Rochester N.Y. Date March 16-1957
Physician's Christine Walehouse
Statement 216 Critten Den Blvd. Rochester N.Y. Date March 16-1957
Examination requirements Were not dispensed with by judge or justice
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

BRIDE
Name Bloss Mary Helen O'Brien Color White
Residence 5 North Gardner St. Rochester N.Y. Age 21, Sept. 10-1935
Occupation Factory Worker - Kodak No. of marriage 1st
Former husband or husbands living or dead _____
Birthplace Rochester, New York
Father Elmer William O'Brien Divorced
Birthplace U.S. " when
Mother Erinette Balling " where
Birthplace U.S. " against whom
Laboratory Rochester Health Bureau Lab.
Statement Rochester 20, N.Y. Date March 4-1957
Physician's Dr. Craig Geller
Statement 32 St. Nicholas St. Rochester N.Y. Date Feb. 28-1957
Examination requirements Were not dispensed with by judge or justice
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Date: Affidavit March 14-1957 License March 14-1957 3:03P Marriage March 14-1957 10:30A Place of Marriage Seneca Falls N.Y.
Official John O. Baine, Seneca Falls N.Y. Profession Clergyman Witness Mrs. Ann Marie Cutting, Rochester N.Y.
Official 97 W. Bayard St. Seneca Falls N.Y. Profession Clergyman Witness Mrs. Ann Marie Cutting, Rochester N.Y.
Period for solemnization of marriage begins at 3:30P.M. on the 15 day of March 1957 and ends the 13 day of May 1957

City Perinton County Monroe STATE OF NEW YORK No. 12
Clerk Elizabeth H. Pears

GROOM
Name William Albert Cronley Color White
Residence 1087 Webster Fairport Rd. N.Y. Age 31, Sept. 13-1920
Occupation Trade Supervisor - Webster No. of marriage 2nd
Former wife or wives living or dead Living
Birthplace Chenango, New York
Father John Clyde Cronley Divorced Yes
Birthplace Canada " when July 27-1955
Mother Matha Caroline Kemp " where Canada
Birthplace U.S. " against whom Elmer A. Cronley
Laboratory Monroe County Laboratories
Statement 435 E. Henrietta Rd. Rochester 20, N.Y. Date 3-12-57
Physician's Jason O. Cook
Statement 112 South Ave. Webster N.Y. Date 3-8-57
Examination requirements Were not dispensed with by judge or justice
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

BRIDE
Name Pauline Ella Thresher Color White
Residence 20 South Ave. Webster N.Y. Age 33, Oct. 21-1923
Occupation Teacher - Webster School No. of marriage 1st
Former husband or husbands living or dead _____
Birthplace Scranton, N.Y.
Father Leonard Freeman Thresher Divorced
Birthplace U.S. " when
Mother Emma Dora French " where
Birthplace U.S. " against whom
Laboratory Monroe County Laboratories
Statement 435 E. Henrietta Rd. Rochester 20, N.Y. Date 3-12-57
Physician's Jason O. Cook
Statement 112 South Ave. Webster N.Y. Date 3-8-57
Examination requirements Were not dispensed with by judge or justice
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____ (Form)

Date: Affidavit March 18-1957 License March 18-1957 4:31P Marriage March 28-1957 7 P.M. Place of Marriage Webster N.Y.
Official Robert Hoster (Month) (Day) (Year) (Hour) George Van Hoover-889 3rd St. Webster N.Y.
Official 551 Ridge Rd. W. Webster N.Y. Profession Clergyman Minister Witness Michael Van Hoorn-889 3rd St. Webster N.Y.
Period for solemnization of marriage begins at 4:36P.M. on the 19 day of March 1957 and ends the 17 day of May 1957

mailed to state Dept
of Health 4-5-57
Original State Dept
of Health 4-1-57
mailed to state Dept
of Health 4-5-57
Original State Dept
of Health 4-5-57

RECORD OF MARRIAGES

mailed to State Dept. of Health 4-1-57

City Perinton County Monroe STATE OF NEW YORK No. 13
Clerk Elizabeth H. Pierce

GROOM

Name Russell Gene Thom Color White
 Residence 40 Garrison St. Iyona N.Y. Age 21, June 2, 1938
 Occupation Machine work Machine Shop No. of marriage 1st
 Birthplace Iyona, New York Former wife or wives living or dead.
 Father Paul Gene Thom Divorced
 Birthplace U.S. " when
 Mother Margaretta Rogan " where
 Birthplace U.S. " against whom
 Laboratory Statement Division of Laboratories Date 3-18-1957
 Physician's Statement Frank Wood, Broad St. Iyona N.Y. Date 3-18-1957
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Joseph Grace Hine Color White
 Residence 24 Rosemont Ave. Rochester N.Y. Age 22, June 2, 1934
 Occupation Nurse - Hospital No. of marriage 1st
 Birthplace Iyona, New York Former husband or husbands living or dead.
 Father Carlton Westfelt Hine Divorced
 Birthplace U.S. " when
 Mother Catherine Anna Schufelt " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau Date 3-16-1957
 Physician's Statement Erminio Pignatelli, 1425 Parkland Ave. N.Y. Date 3-15-1957
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit March 28-1957 License March 28-1957 Marriage March 30-1957 2 P.M. Place of Marriage Clyde N.Y.
 Official Clayde N.Y. Profession Minister Witness Oliver Hine - Savannah N.Y.
 Period for solemnization of marriage begins at 4:48 P.M. on the 29 day of March 1957 and ends the 27 day of May 1957

City Perinton County Monroe STATE OF NEW YORK No. 14
Clerk Elizabeth H. Pierce

mailed to State Dept. of Health 5-1-57

GROOM

Name Walter Sherman Jr. Color White
 Residence Allison Valley Rd. N.Y. Age 31, Aug. 14, 1925
 Occupation School teacher - Central School No. of marriage 1st
 Birthplace Waldville N.Y. Former wife or wives living or dead.
 Father Walter Almond Sherman Divorced
 Birthplace U.S. " when
 Mother Catherine Murphy " where
 Birthplace U.S. " against whom
 Laboratory Statement N.Y. State Dept. of Health Laboratories Date 4-12-57
 Physician's Statement 201 Church St. Newark N.Y. Date 4-10-57
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Joseph Myrtle Strachan Color White
 Residence 41 Frank St. Raigam N.Y. Age 31, Nov. 1, 1925
 Occupation School teacher - Grade School No. of marriage 1st
 Birthplace Iyona, N.Y. Former husband or husbands living or dead.
 Father Christopher Eugene Strachan Divorced
 Birthplace U.S. " when
 Mother Edith Vetter Dunkel " where
 Birthplace U.S. " against whom
 Laboratory Statement N.Y. State Dept. of Health Laboratories Date 4-12-57
 Physician's Statement 201 Church St. Newark N.Y. Date 4-10-57
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit April 18-1957 License April 18-1957 Marriage April 22-1957 10:00 A.M. Place of Marriage Rochester N.Y.
 Official Rev. Harry G. Farrell Profession Catholic Priest Witness John F. Sherman - 33 Chauncey St. Cheektowatch N.Y.
 Period for solemnization of marriage begins at 8:20 P.M. on the 19 day of April 1957 and ends the 17 day of June 1957

City Perinton County Monroe STATE OF NEW YORK No. 15
Clerk Elizabeth H. Pierce

mailed to State Dept. of Health 5-6-57

GROOM

Name Victor L. Corso Color White
 Residence 45 Railroad St. Raigam N.Y. Age 21, Mar. 21, 1936
 Occupation Sheet metal worker - factory No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead.
 Father John Corso Divorced
 Birthplace Italy " when
 Mother Cecilia Colombino " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date 4-16-57
 Physician's Statement 20 West Church St. Raigam N.Y. Date 4-12-57
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Joanna Saltrelli Color White
 Residence 404 West 20th St. East Rochester N.Y. Age 19, June 12, 1937
 Occupation Typist - Telephone Co. No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead.
 Father Donald Anthony Saltrelli Divorced
 Birthplace Italy " when
 Mother Philomena St. Paul " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date 4-16-57
 Physician's Statement 20 West Church St. Raigam N.Y. Date 4-12-57
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit April 19-1957 License April 19-1957 Marriage April 27-1957 10:30 A.M. Place of Marriage East Rochester N.Y.
 Official Rev. G. B. Molyneux Profession Catholic Priest Witness Alvina Stephany - East Rochester N.Y.
 Period for solemnization of marriage begins at 11:43 A.M. on the 20 day of April 1957 and ends the 18 day of June 1957

RECORD OF MARRIAGES

City Town Perinton County Monroe STATE OF NEW YORK No. 16
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>John Andrew Wolson</u>	Color <u>White</u>	Name <u>Gloria Jean Venema</u>	Color <u>White</u>
Residence <u>145 Lake Ave Rochester N.Y.</u>	Age <u>37</u> April 14 1920	Residence <u>25 Darin St Rochester N.Y.</u>	Age <u>29</u> Jan 20 1928
Occupation <u>Business Broker</u>	No. of marriage <u>1st</u>	Occupation <u>Check County Office</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Andrew John Wolson</u>	Divorced	Father <u>Dewey Theodore Venema</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Salomee Feluch</u>	" where	Mother <u>Louise Gladys Rogers</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Health Bureau Rochester N.Y.</u>	Date <u>4-18-57</u>	Laboratory Statement <u>Health Bureau Rochester N.Y.</u>	Date <u>4-18-57</u>
Physician's Statement <u>M.S. Hattigan</u>	Date <u>4-13-57</u>	Physician's Statement <u>M.S. Hattigan</u>	Date <u>4-13-57</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>April 20 1957</u>	License <u>April 20 1957 10:00 A.M.</u>	Marriage <u>April 22 1957 10:00 A.M.</u>	Place of Marriage <u>Rochester N.Y.</u>
Official <u>Richard A. Hart</u>	Witness <u>Helen M. McKee</u>	Official <u>Richard A. Hart</u>	Witness <u>Joseph G. Miller</u>
Period for solemnization of marriage begins at <u>10:00</u> A.M. on the <u>21</u> day of <u>April</u> 1957 and ends the <u>19</u> day of <u>June</u> 1957			

mailed to state Dept of Health 5-6-57

City Town Perinton County Monroe STATE OF NEW YORK No. 17
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Albert Charles Hutchison</u>	Color <u>White</u>	Name <u>Marion Arlene Sand</u>	Color <u>White</u>
Residence <u>Township Fairport N.Y.</u>	Age <u>26</u> June 22 1930	Residence <u>Township Fairport N.Y.</u>	Age <u>17</u> July 18 1939
Occupation <u>Construction Building Contractor</u>	No. of marriage <u>1st</u>	Occupation <u>Station Wadsworth Large maker</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Albert Arthur Hutchison</u>	Divorced	Father <u>Edward James Sand Sr</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Chas M. Bush</u>	" where	Mother <u>Edna Mervin Riley</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>4-16-57</u>	Laboratory Statement <u>435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>4-16-57</u>
Physician's Statement <u>George A. Dean</u>	Date <u>4-11-57</u>	Physician's Statement <u>George A. Dean</u>	Date <u>4-11-57</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by <u>Edward G. Sand Sr</u>	Relation <u>Father</u> Date <u>April 24 1957</u>
Consent by _____	Relation _____ Date _____	Consent by <u>Edna M. Sand</u>	Relation <u>Mother</u> Date <u>April 24 1957</u>
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>April 24 1957</u>	License <u>April 24 1957 7:30 P.M.</u>	Marriage <u>May 4 1957 10:00 A.M.</u>	Place of Marriage <u>Fairport N.Y.</u>
Official <u>Richard A. Hart</u>	Witness <u>Gabriel F. Hutchison</u>	Official <u>Richard A. Hart</u>	Witness <u>Edna M. Sand</u>
Period for solemnization of marriage begins at <u>7:55</u> P.M. on the <u>25</u> day of <u>April</u> 1957 and ends the <u>23</u> day of <u>June</u> 1957			

mailed to state Dept of Health 6-5-58

City Town Perinton County Monroe STATE OF NEW YORK No. 18
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Frank America Ricci</u>	Color <u>White</u>	Name <u>Mary Elizabeth Dittus</u>	Color <u>White</u>
Residence <u>218 East Ave East Rochester N.Y.</u>	Age <u>27</u> May 3 1929	Residence <u>111 East Elm St East Rochester N.Y.</u>	Age <u>24</u> May 13 1932
Occupation <u>Barber</u>	No. of marriage <u>1st</u>	Occupation <u>Barber</u>	No. of marriage <u>1st</u>
Birthplace <u>Manhatten N.Y.</u>	Former wife or wives living or dead	Birthplace <u>East Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Frank B. Ricci</u>	Divorced	Father <u>Andrew Dittus, Sr</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Cephalovakia</u>	" when
Mother <u>Mary Susan Botundo</u>	" where	Mother <u>Mary Messer</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Cephalovakia</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>4-23-57</u>	Laboratory Statement <u>435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>4-23-57</u>
Physician's Statement <u>G. M. McEckan</u>	Date <u>4-22-57</u>	Physician's Statement <u>G. M. McEckan</u>	Date <u>4-22-57</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>April 25 1957</u>	License <u>April 25 1957 12:30 P.M.</u>	Marriage <u>April 27 1957 9 A.M.</u>	Place of Marriage <u>East Rochester N.Y.</u>
Official <u>Paul G. Murphy</u>	Witness <u>Paul G. Murphy</u>	Official <u>Paul G. Murphy</u>	Witness <u>Paul G. Murphy</u>
Period for solemnization of marriage begins at <u>12:27</u> P.M. on the <u>26</u> day of <u>April</u> 1957 and ends the <u>24</u> day of <u>June</u> 1957			

mailed to state Dept of Health 5-6-57

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 19
 Town Perinton Clerk Elizabeth M. Bouley

GROOM		BRIDE	
Name <u>Anthony Pizzo</u>	Color <u>White</u>	<u>Verna Joanne Memano</u>	Color <u>White</u>
Residence <u>341 Roswood Ter. Rochester N.Y.</u>	Age <u>21</u> , April <u>8</u> 193 <u>8</u>	<u>14 Wald St. Rochester N.Y.</u>	Age <u>18</u> , Jan. <u>27</u> 19 <u>39</u>
Occupation <u>Wrapper in Bakery</u>	No. of marriage <u>1st</u>	<u>At home</u>	No. of marriage <u>2nd</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	<u>Rochester N.Y.</u>	Former husband or husbands living or dead <u>living</u>
Father <u>Salvatore Pizzo</u>	Divorced	<u>Anthony Memano</u>	Divorced <u>annulled</u>
Birthplace <u>Rochester N.Y.</u>	" when	<u>Rochester N.Y.</u>	" when <u>July 5</u> 19 <u>36</u>
Mother <u>Anna Adelia</u>	" where	<u>Josephine Callame</u>	" where <u>Rochester N.Y.</u>
Birthplace <u>Rochester N.Y.</u>	" against whom	<u>Rochester N.Y.</u>	" against whom <u>Charles E. Schane</u>
Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>4-24-57</u>	<u>Rochester Health Bureau</u>	Date <u>4-24-57</u>
Physician's Statement <u>Michael T. S. Groat</u>	Date <u>4-22-57</u>	<u>Michael T. S. Groat</u>	Date <u>4-22-57</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	<u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>Certified copy of birth</u>	(Form)	<u>Certified copy of birth</u>	(Form)
Date: Affidavit <u>April 29 1957</u>	License <u>April 29 1957</u>	Marriage <u>April 30 1957</u>	Place of Marriage <u>Fairport N.Y.</u>
Official <u>12 East Church St. Fairport N.Y.</u>	Profession <u>Clergyman</u>	Witness <u>Wanda M. Spaulding</u>	<u>24 Canfield St. Rochester N.Y.</u>
Period for solemnization of marriage begins at <u>1:57 P.M.</u> on the <u>30</u> day of <u>April</u> 19 <u>57</u> and ends the <u>28</u> day of <u>June</u> 19 <u>57</u>			

Requested State of Health 5-1-57
 Requested State of Health 6-3-57
 Requested State of Health 6-5-1957

City Perinton County Monroe STATE OF NEW YORK No. 20
 Town Perinton Clerk Elizabeth H. Scione

GROOM		BRIDE	
Name <u>Robert Victor Ochenden</u>	Color <u>White</u>	<u>Grace Consuello D'Agostino</u>	Color <u>White</u>
Residence <u>7 Valley Brook Road Fairport N.Y.</u>	Age <u>24</u> , July <u>30</u> 19 <u>32</u>	<u>219 Park Drive East Rochester N.Y.</u>	Age <u>26</u> , Sept. <u>15</u> 19 <u>30</u>
Occupation <u>Bank Teller - Bank</u>	No. of marriage <u>1st</u>	<u>Bank Teller - Bank</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	<u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Frank E. Ochenden Jr.</u>	Divorced	<u>Anthony D'Agostino</u>	Divorced
Birthplace <u>U.S.</u>	" when	<u>Italy</u>	" when
Mother <u>Irene Halenaly</u>	" where	<u>Mary Consuello D'Agostino</u>	" where
Birthplace <u>U.S.</u>	" against whom	<u>Italy</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>5-3-57</u>	<u>Monroe County Laboratories</u>	Date <u>5-3-57</u>
Physician's Statement <u>John Kraus - Fairport N.Y.</u>	Date <u>4-29-57</u>	<u>John Kraus - Fairport N.Y.</u>	Date <u>4-29-57</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	<u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>May 6 1957</u>	License <u>May 6 1957</u>	Marriage <u>May 11 1957</u>	Place of Marriage <u>East Rochester N.Y.</u>
Official <u>2075 Canfield St. East Rochester</u>	Profession <u>Catholic Priest</u>	Witness <u>F. Eugene Ochenden III</u>	<u>200 Canfield St. White N.Y.</u>
Period for solemnization of marriage begins at <u>4:41 P.M.</u> on the <u>7</u> day of <u>May</u> 19 <u>57</u> and ends the <u>5</u> day of <u>July</u> 19 <u>57</u>			

Requested State of Health 6-3-57
 Requested State of Health 6-5-1957

City Perinton County Monroe STATE OF NEW YORK No. 21
 Town Perinton Clerk Elizabeth H. Scione

GROOM		BRIDE	
Name <u>Maurice Eugene Barbach</u>	Color <u>White</u>	<u>Christanne Mary Mille</u>	Color <u>White</u>
Residence <u>338 North Ave. Fairport N.Y.</u>	Age <u>25</u> , May <u>4</u> 19 <u>32</u>	<u>45 East Church St. Fairport N.Y.</u>	Age <u>31</u> , April <u>22</u> 19 <u>26</u>
Occupation <u>Manager - Farm Supply</u>	No. of marriage <u>1st</u>	<u>Teacher, Nursery School</u>	No. of marriage <u>1st</u>
Birthplace <u>Wolcott N.Y.</u>	Former wife or wives living or dead	<u>Fairport N.Y.</u>	Former husband or husbands living or dead
Father <u>Lawrence Arnold Barbach</u>	Divorced	<u>Henry Mille</u>	Divorced
Birthplace <u>U.S.</u>	" when	<u>Germany</u>	" when
Mother <u>Ellen Mae Flint</u>	" where	<u>Charlotte Christina Weiskin</u>	" where
Birthplace <u>U.S.</u>	" against whom	<u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>5-3-57</u>	<u>Monroe County Laboratories</u>	Date <u>5-3-57</u>
Physician's Statement <u>J. N. M. Carhen - Fairport N.Y.</u>	Date <u>4-29-57</u>	<u>J. N. M. Carhen - Fairport N.Y.</u>	Date <u>4-29-57</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	<u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>May 18 1957</u>	License <u>May 18 1957</u>	Marriage <u>May 23 1957</u>	Place of Marriage <u>Fairport N.Y.</u>
Official <u>42 Penn St. Fairport N.Y.</u>	Profession <u> Lutheran clergyman</u>	Witness <u>Sean D. Barbach</u>	<u>63 West Ave. Fairport N.Y.</u>
Period for solemnization of marriage begins at <u>9:20 A.M.</u> on the <u>19</u> day of <u>May</u> 19 <u>57</u> and ends the <u>17</u> day of <u>July</u> 19 <u>57</u>			

Requested State of Health 6-3-57
 Requested State of Health 6-5-56

RECORD OF MARRIAGES

Original State Com 6-3-57
mailed to state Dept of Health 6-5-56
Original State Com 7-1-57
mailed to state Dept of Health 7-5-57
Original State Com 7-1-57
mailed to state Dept of Health 7-5-57

City Perinton County Monroe STATE OF NEW YORK No. 22
Town Perinton Clerk Paul M. Boudier

GROOM		BRIDE	
Name <u>Henry Edward Zamcater</u> (Full name)	Color <u>White</u>	Name <u>Betty Elaine Balin</u> (Full name)	Color <u>White</u>
Residence <u>53 State St Fairport N.Y.</u>	Age <u>23, May 25, 1933</u>	Residence <u>2085 South Lincoln Rd. East Rochester N.Y.</u>	Age <u>18, May 20, 1939</u>
Occupation <u>Carpenter - helper on shops</u>	No. of marriage <u>1st</u>	Occupation <u>Baggins - Lundquist N.Y.</u>	No. of marriage <u>1st</u>
Birthplace <u>Catskill, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>East Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Albert Henry Zamcater</u> (Name of)	Divorced	Father <u>Ernest James Balin</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Mary Rosina Demass</u> (Maiden name of)	" where	Mother <u>Dorothy Isabelle Passage</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories</u> 435 E. Henrietta Rd. Rochester N.Y. Date <u>5-3-57</u> (Name and address of laboratory) (Test completed)		Laboratory Statement <u>Monroe County Laboratories</u> 435 E. Henrietta Rd. Rochester N.Y. Date <u>5-3-57</u> (Name and address of laboratory) (Test completed)	
Physician's Statement <u>John Kraai, Fairport N.Y.</u> Date <u>4-30-57</u> (Name and address of physician) (Specimen taken)		Physician's Statement <u>John Kraai, Fairport N.Y.</u> Date <u>4-30-57</u> (Name and address of physician) (Specimen taken)	
Examination requirements <u>Were not</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>Were not</u> dispensed with by judge or justice (Were or were not)	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>original birth record</u> (Form)		Proof of age <u>original birth record</u> (Form)	
Date: Affidavit <u>May 21, 1957</u> License <u>May 21, 1957</u> Marriage <u>May 25, 1957</u> (Month) (Day) (Year) (Month) (Day) (Year) (Month) (Day) (Year) (Hour)		Date: Affidavit <u>May 21, 1957</u> License <u>May 21, 1957</u> Marriage <u>May 25, 1957</u> (Month) (Day) (Year) (Month) (Day) (Year) (Month) (Day) (Year) (Hour)	
Official <u>Paul M. Boudier</u> Profession <u>Roman Catholic Priest</u>		Official <u>Paul M. Boudier</u> Profession <u>Roman Catholic Priest</u>	
Witness <u>William J. Groat</u>		Witness <u>Violet Schogian</u>	
Period for solemnization of marriage begins at <u>11:31 P.M.</u> on the <u>22</u> day of <u>May</u> 19 <u>57</u> and ends the <u>20</u> day of <u>July</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>11:31 P.M.</u> on the <u>22</u> day of <u>May</u> 19 <u>57</u> and ends the <u>20</u> day of <u>July</u> 19 <u>57</u>	

City Perinton County Monroe STATE OF NEW YORK No. 23
Town Perinton Clerk Elizabeth H. Price

GROOM		BRIDE	
Name <u>Harold William Shea</u> (Full name)	Color <u>White</u>	Name <u>Jane Elizabeth Connor</u> (Full name)	Color <u>White</u>
Residence <u>371 Jefferson Ave Fairport N.Y.</u>	Age <u>23, Mar 13, 1934</u>	Residence <u>8 Madison St. Sydnor N.Y.</u>	Age <u>22, Dec 24, 1934</u>
Occupation <u>Engineer - West Electric Corp.</u>	No. of marriage <u>1st</u>	Occupation <u>At Home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Brooklyn N.Y.</u>	Former husband or husbands living or dead.
Father <u>William Henry Shea</u> (Name of)	Divorced	Father <u>William John Connor</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Beatrice Batha Sampson</u> (Maiden name of)	" where	Mother <u>Ruth Margaret Donovan</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories</u> 435 E. Henrietta Rd. Rochester 20 N.Y. Date <u>6-7-57</u> (Name and address of laboratory) (Test completed)		Laboratory Statement <u>St. Leo's Lab. Canton N.Y.</u> Date <u>5-29-57</u> (Name and address of laboratory) (Test completed)	
Physician's Statement <u>William S. Grotz</u> 20 West Church St. Fairport N.Y. Date <u>6-3-57</u> (Name and address of physician) (Specimen taken)		Physician's Statement <u>Marshall Stevenson, Catskill N.Y.</u> Date <u>5-27-57</u> (Name and address of physician) (Specimen taken)	
Examination requirements <u>Were not</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>Were not</u> dispensed with by judge or justice (Were or were not)	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>June 11, 1957</u> License <u>June 11, 1957</u> Marriage <u>June 29, 1957</u> (Month) (Day) (Year) (Month) (Day) (Year) (Month) (Day) (Year) (Hour)		Date: Affidavit <u>June 11, 1957</u> License <u>June 11, 1957</u> Marriage <u>June 29, 1957</u> (Month) (Day) (Year) (Month) (Day) (Year) (Month) (Day) (Year) (Hour)	
Official <u>Richard A. Hart</u> Profession <u>R.C. Priest</u>		Official <u>Richard A. Hart</u> Profession <u>R.C. Priest</u>	
Witness <u>Kathleen M. Connor</u>		Witness <u>Kathleen M. Connor</u>	
Period for solemnization of marriage begins at <u>3:31 P.M.</u> on the <u>12</u> day of <u>June</u> 19 <u>57</u> and ends the <u>10</u> day of <u>August</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>3:31 P.M.</u> on the <u>12</u> day of <u>June</u> 19 <u>57</u> and ends the <u>10</u> day of <u>August</u> 19 <u>57</u>	

City Perinton County Monroe STATE OF NEW YORK No. 24
Town Perinton Clerk Elizabeth H. Price

GROOM		BRIDE	
Name <u>Daniel Richard Garland</u> (Full name)	Color <u>White</u>	Name <u>Roberta Ann Bianucci</u> (Full name)	Color <u>White</u>
Residence <u>1341 Fairport Rd. Perinton N.Y.</u>	Age <u>20, June 11, 1936</u>	Residence <u>114 N. Main St. Fairport N.Y.</u>	Age <u>20, Dec 10, 1936</u>
Occupation <u>Clerical work - U.S. Navy</u>	No. of marriage <u>1st</u>	Occupation <u>Clerical work - Radio Company</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Fairport N.Y.</u>	Former husband or husbands living or dead.
Father <u>William George Garland</u> (Name of)	Divorced	Father <u>Thomas Bianucci</u> (Name of)	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Mildred Frances Allain</u> (Maiden name of)	" where	Mother <u>Anna Carbonato</u> (Maiden name of)	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories</u> 435 E. Henrietta Rd. Rochester 20 N.Y. Date <u>6-11-57</u> (Name and address of laboratory) (Test completed)		Laboratory Statement <u>Monroe County Laboratories</u> 435 E. Henrietta Rd. Rochester 20 N.Y. Date <u>6-7-57</u> (Name and address of laboratory) (Test completed)	
Physician's Statement <u>William S. Grotz</u> 20 West Church St. Fairport N.Y. Date <u>6-10-57</u> (Name and address of physician) (Specimen taken)		Physician's Statement <u>William S. Grotz</u> 20 West Church St. Fairport N.Y. Date <u>6-3-57</u> (Name and address of physician) (Specimen taken)	
Examination requirements <u>Were not</u> dispensed with by judge or justice (Were or were not)		Examination requirements <u>Were not</u> dispensed with by judge or justice (Were or were not)	
Consent by <u>William G. Garland</u> Relation <u>Father</u> Date <u>6-13-57</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Mildred S. Garland</u> Relation <u>Mother</u> Date <u>6-13-57</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Automobile driver's license</u> (Form)		Proof of age <u>Birth record</u> (Form)	
Date: Affidavit <u>June 14, 1957</u> License <u>June 14, 1957</u> Marriage <u>June 15, 1957</u> (Month) (Day) (Year) (Month) (Day) (Year) (Month) (Day) (Year) (Hour)		Date: Affidavit <u>June 14, 1957</u> License <u>June 14, 1957</u> Marriage <u>June 15, 1957</u> (Month) (Day) (Year) (Month) (Day) (Year) (Month) (Day) (Year) (Hour)	
Official <u>Richard A. Hart</u> Profession <u>Priest</u>		Official <u>Richard A. Hart</u> Profession <u>Priest</u>	
Witness <u>William George Garland</u>		Witness <u>Francesmary Tunesi</u>	
Period for solemnization of marriage begins at <u>10:01 A.M.</u> on the <u>15</u> day of <u>June</u> 19 <u>57</u> and ends the <u>13</u> day of <u>August</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>10:01 A.M.</u> on the <u>15</u> day of <u>June</u> 19 <u>57</u> and ends the <u>13</u> day of <u>August</u> 19 <u>57</u>	

RECORD OF MARRIAGES

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Dept of Health 7-1-57

City Perinton County Monroe STATE OF NEW YORK No. 25
Clerk Elizabeth H. Pierce

GROOM

Name George Howard Francis Color White
 Residence 20 Woodside Dr Fairfield N.Y. Age 21, Jan 31 1936
 Occupation Telephone Repairman No. of marriage 1st
 Birthplace Stuyvesant, Calverton, New York Former wife or wives living or dead
 Father George Merritt Francis Divorced
 Birthplace U.S. " when
 Mother Elizabeth Ida Ford " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Henrietta Rd. Rochester 20, N.Y. Date 6-18-57 (Test completed)
 Physician's Statement William S. Cahoon
20 West Church St. Fairport N.Y. Date 6-12-57 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Birth record (Form)

BRIDE

Name Seal Louise Rogers Color White
 Residence 168 W. Commercial St. East Rochester N.Y. Age 18, June 8 1939
 Occupation At home No. of marriage 1st
 Birthplace Brighton N.Y. Former husband or husbands living or dead
 Father Unknown Divorced
 Birthplace _____ " when
 Mother Dorothy Madeline Rogers " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Henrietta Rd. Rochester 20, N.Y. Date 6-18-57 (Test completed)
 Physician's Statement William S. Cahoon
20 West Church St. Fairport N.Y. Date 6-12-57 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Birth record (Form)

Date: Affidavit June 22 1957 License June 22 1957 11:24 AM Marriage June 29 1957 2:00 P. Place of Marriage Fairfield N.Y.
 Official George L. Carnshaw (Month) (Day) (Year) (Hour) Naomi L. Scheraga -167 W. Commercial St. East Rochester N.Y.
 Official 1515 South Rd. Fairfield Profession Clergyman Witness John Francis -20 Woodside Dr. Fairfield N.Y.

Period for solemnization of marriage begins at 11:24 A.M. on the 23 day of June 1957 and ends the 21 day of August 1957

City Perinton County Monroe STATE OF NEW YORK No. 26
Clerk Elizabeth H. Pierce

GROOM

Name Erwood William Beckwith Color White
 Residence 15 Dewey Ave. Fairport N.Y. Age 21, Mar 27 1936
 Occupation College Graduate No. of marriage 1st
 Birthplace Fairport N.Y. Former wife or wives living or dead
 Father Erwood William Beckwith Sr Divorced
 Birthplace U.S. " when
 Mother Grace Knobler " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Henrietta Rd. Rochester 20, N.Y. Date 6-4-57 (Test completed)
 Physician's Statement G. N. McCaughen
70 South Main Fairport N.Y. Date 5-29-57 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Automobile driver's license (Form)

BRIDE

Name Sinda Mae Elbert Color White
 Residence 46 Nelson St. Fairport N.Y. Age 19, Aug 21 1937
 Occupation Medical Secretary No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father Dr. John Elbert Divorced
 Birthplace U.S. " when
 Mother Ethel Jeanette Murray " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Henrietta Rd. Rochester 20, N.Y. Date 6-4-57 (Test completed)
 Physician's Statement G. N. McCaughen
70 South Main Fairport N.Y. Date 5-29-57 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Automobile driver's license (Form)

Date: Affidavit June 23 1957 License June 23 1957 11:57 A Marriage June 28 1957 8:00 P. Place of Marriage Fairport N.Y.
 Official Samuel Thurman (Month) (Day) (Year) (Hour) Halstead K. Buel -15 Dewey Ave. Fairport N.Y.
 Official 1 Elford St. Fairport N.Y. Profession Clergyman Witness Margaret K. Elbert -545 Washington St. East Rochester N.Y.

Period for solemnization of marriage begins at 11:57 A.M. on the 23 day of June 1957 and ends the 21 day of August 1957

City Perinton County Monroe STATE OF NEW YORK No. 27
Clerk Elizabeth H. Pierce

GROOM

Name Albert Walter Valcone Color White
 Residence 94 High St. Fairport N.Y. Age 24, Mar 3 1933
 Occupation Air Force U.S. Air Force No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father George Valcone Divorced
 Birthplace U.S. " when
 Mother Helen Rachow " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Henrietta Rd. Rochester 20, N.Y. Date 6-26-57 (Test completed)
 Physician's Statement G. N. McCaughen
70 South Main St. Fairport N.Y. Date 6-24-57 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Rosemarie Ann Tummarello Color White
 Residence 94 High St. Fairport N.Y. Age 16, [redacted]
 Occupation At home No. of marriage 1st
 Birthplace Seranton, Penn Former husband or husbands living or dead
 Father Anthony Tummarello Divorced
 Birthplace Italy " when
 Mother Josephine Scalfido " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Henrietta Rd. Rochester 20, N.Y. Date 6-21-57 (Test completed)
 Physician's Statement G. N. McCaughen
70 South Main St. Fairport N.Y. Date 6-18-57 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation Mother Date 6-28-57
 Consent by _____ Relation Father Date 6-28-57
 Proof of age Baptismal record (Form)

Date: Affidavit June 28 1957 License June 28 1957 9:18 A Marriage June 29 1957 10:00 P. Place of Marriage Fairport N.Y.
 Official Richard Hart (Month) (Day) (Year) (Hour) Edna A. Scalfido -19 Catherine St. Syracuse N.Y.
 Official 20 East Ave. Fairport N.Y. Profession Great Witness Ellen S. Hansen -Massena N.Y.

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Dept of Health 7-5-57

RECORD OF MARRIAGES

mailed to state Dept of Health 8-5-57

City Perinton County Monroe STATE OF NEW YORK No. 28
Clerk Sara M. Gault

GROOM

Name Charles Raymond Aubach Color White
 Residence 131 Galathea Rd. Rochester N.Y. Age 23, Mar. 5, 1934
 Occupation Marine Corp. Second Lieut. No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead.
 Father Charles Gustav Aubach Divorced
 Birthplace U.S.A. " when
 Mother Getrude Cecelia Kuczyński " where
 Birthplace U.S.A. " against whom

Laboratory Statement Rochester Health Bureau
44 Marshall St. Rochester N.Y. Date 7-2-57 (Test completed)
 Physician's Statement W. H. Coleman
260 Pittsford Blvd. Rochester N.Y. Date 6-29-57 (Specimens taken)
 Examination requirements Was not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

BRIDE

Name Helen Marie Torpey Color White
 Residence 960 Conner St. Fairport N.Y. Age 21, Jan 14, 1936
 Occupation Secretary, Eastern Kodak Co. No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead.
 Father Richard Stephen Torpey Divorced
 Birthplace U.S.A. " when
 Mother Genevieve Augusta River " where
 Birthplace U.S.A. " against whom

Laboratory Statement Rochester Health Bureau
44 Marshall St. Rochester N.Y. Date 7-2-57 (Test completed)
 Physician's Statement W. H. Coleman
260 Pittsford Blvd. Rochester N.Y. Date 6-29-57 (Specimens taken)
 Examination requirements Was not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

Date: Affidavit July 7, 1957 License July 8, 1957, 3:52 P Marriage July 13, 1957, 10:00 A Place of Marriage Fairport N.Y.
 Official Richard D. Hart Profession John A. Murray, 608 Westchick Ave. Fairport, N.Y.
 Period for solemnization of marriage begins at 3:52 P.M. on the 9 day of July 1957 and ends the 7 day of Sept. 1957

City Perinton County Monroe STATE OF NEW YORK No. 29
Clerk Elizabeth H. Seane

GROOM

Name Theodore Pella Color White
 Residence 642 St. Fairfield Norwich Conn. Age 30, June 29, 1927
 Occupation Sales Engineer No. of marriage 1st
 Birthplace East Rochester N.Y. Former wife or wives living or dead.
 Father Audolph Anthony Pella Divorced
 Birthplace U.S. " when
 Mother Mary Rose Ciesla " where
 Birthplace U.S. " against whom

Laboratory Statement mailed to state Dept of Health
1179 Main St. Hartford Conn. Date 7-10-57 (Test completed)
 Physician's Statement Thomas L. G. Motes
75 East Ave. Norwich Conn. Date 7-9-57 (Specimens taken)
 Examination requirements Was not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

BRIDE

Name Christal Caron Color White
 Residence 123 Mundak Rd. Baltimore Md. Age 29, Dec. 17, 1927
 Occupation Research Assistant, Medical No. of marriage 1st
 Birthplace Bad Oldesloe, Germany Former husband or husbands living or dead.
 Father Frank Caron Divorced
 Birthplace U.S. " when
 Mother Anna Siehler " where
 Birthplace Germany " against whom

Laboratory Statement Baltimore City Health Dept. Municipal Office 820 E
The Pennsylvania Date 6-19-57 (Test completed)
 Physician's Statement 601 North Broadway Baltimore 5, Md. Date 6-17-57 (Specimens taken)
 Examination requirements Was not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age _____ (Form)

Date: Affidavit July 15, 1957 License July 15, 1957, 12:00 P Marriage July 20, 1957, 12:15 P Place of Marriage East Rochester N.Y.
 Official H. L. Strand Profession Arthur Claryman Witness John Caron - 324 East 92nd St. New York, N.Y.
 Period for solemnization of marriage begins at 12:04 P.M. on the 16 day of July 1957 and ends the 14 day of Sept. 1957

City Perinton County Monroe STATE OF NEW YORK No. 30
Clerk Sara M. Gault

GROOM

Name George Lloyd Bassage Color White
 Residence Walworth - Ontario Rd. Age 22, May 11, 1935
 Occupation Farm - on farm No. of marriage 1st
 Birthplace Walworth, New York Former wife or wives living or dead.
 Father Loyde F. Bassage Divorced
 Birthplace U.S. " when
 Mother Luella Sheewood " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Hemetta Rd. Rochester N.Y. Date 7-11-57 (Test completed)
 Physician's Statement Earl Gault
102 Church St. Fairport N.Y. Date 7-9-57 (Specimens taken)
 Examination requirements Was not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age Automobile driver's license (Form)

BRIDE

Name Shiryneth Lee Masdee Color White
 Residence 9 Summit St. Fairport N.Y. Age 18, April 21, 1939
 Occupation at home No. of marriage 1st
 Birthplace Rochester, New York Former husband or husbands living or dead.
 Father Ivan Masdee Divorced
 Birthplace U.S. " when
 Mother Beitha E. Aldridge " where
 Birthplace U.S. " against whom

Laboratory Statement Monroe County Laboratories
435 E. Hemetta Rd. Rochester N.Y. Date 7-11-57 (Test completed)
 Physician's Statement Earl Gault
102 Church St. Fairport N.Y. Date 7-9-57 (Specimens taken)
 Examination requirements Was not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____

Proof of age Birth record (Form)

Date: Affidavit July 23, 1957 License July 23, 1957, 8:41 P Marriage Aug 1, 1957 - 5 P Place of Marriage Fairport N.Y.
 Official Earl Gault Profession Claryman Witness Luella E. Bassage - Walworth N.Y.
 Period for solemnization of marriage begins at 1:49 P.M. on the 24 day of July 1957 and ends the 22 day of Sept. 1957

mailed to state Dept of Health 8-5-57

RECORD OF MARRIAGES

mailed to State Dept. of Health 10-3-57
mailed to State Dept. of Health 10-3-57
mailed to State Dept. of Health 10-3-57

City Perinton County Monroe STATE OF NEW YORK No. 34

Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>James William Watta</u>	Color <u>White</u>	Name <u>Anna May Konarski</u>	Color <u>White</u>
Residence <u>168 W. Commercial St. Rochester</u>	Age <u>19, Dec. 19-1937</u>	Residence <u>247 apt. 27, East Rochester N.Y.</u>	Age <u>17, [redacted]</u>
Occupation <u>Assembly radio phone co.</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Brighton N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>William Henry Watta</u>	Divorced	Father <u>Arthur John Konarski</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Paula Bernice Blaker</u>	" where	Mother <u>Harriet Sarah Ferraro</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y. Date 8-27-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y. Date 8-27-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>212 S. Lincoln St. East Rochester N.Y. Date 8-23-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>212 S. Lincoln St. East Rochester 20, N.Y. Date 8-23-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by <u>Mr. Paul H. Watta</u> Relation <u>Guardian</u> Date <u>Sept. 4-57</u>	Relation Date	Consent by <u>Arthur J. Konarski</u> Relation <u>Guardian</u> Date <u>Sept. 4-57</u>	Relation Date
Consent by _____ Relation _____ Date _____	Relation Date	Consent by _____ Relation _____ Date _____	Relation Date
Proof of age <u>birth record</u> (Form)	(Form)	Proof of age <u>birth record</u> (Form)	(Form)
Date: Affidavit <u>Sept. 4-1957</u> License <u>9-4-1957-9:37A</u> Marriage <u>Sept. 7-1957-10:00A</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)	Date: Affidavit <u>Sept. 4-1957</u> License <u>9-4-1957-9:37A</u> Marriage <u>Sept. 7-1957-10:00A</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official <u>John S. Hempel</u> Profession <u>Roman Catholic Priest</u> Witness <u>Suzanne A. Kreyer</u>	(Name and address of official) (Name and address of witness)	Official <u>John S. Hempel</u> Profession <u>Roman Catholic Priest</u> Witness <u>Suzanne A. Kreyer</u>	(Name and address of official) (Name and address of witness)
Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>5</u> day of <u>September</u> 19 <u>57</u> and ends the <u>3</u> day of <u>November</u> 19 <u>57</u>	(Time) (Day) (Month) (Year)	Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>5</u> day of <u>September</u> 19 <u>57</u> and ends the <u>3</u> day of <u>November</u> 19 <u>57</u>	(Time) (Day) (Month) (Year)

City Perinton County Monroe STATE OF NEW YORK No. 35

Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>Donald Hadan Ewing</u>	Color <u>White</u>	Name <u>Patricia Ann Shannon</u>	Color <u>White</u>
Residence <u>470 W. Whitney Perinton N.Y.</u>	Age <u>24, Feb. 12-1933</u>	Residence <u>280 Woodruff St. Webster N.Y.</u>	Age <u>18, Aug. 9-1939</u>
Occupation <u>Antalloy Telephone Equip</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Sodus, N.Y.</u>	Former husband or husbands living or dead
Father <u>Donald Jerome Ewing</u>	Divorced	Father <u>Island Alfred Shannon</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Thelma Corne Dwyer</u>	" where	Mother <u>Edna Feigel</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester 20, N.Y. Date 9-4-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Rochester Health Dept. Rochester 20, N.Y. Date 9-4-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>8 N. McEachen Gaipost N.Y. Date 9-4-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>8 N. McEachen Gaipost N.Y. Date 9-4-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____	Relation Date	Consent by _____ Relation _____ Date _____	Relation Date
Consent by _____ Relation _____ Date _____	Relation Date	Consent by _____ Relation _____ Date _____	Relation Date
Proof of age _____ (Form)	(Form)	Proof of age <u>birth record</u> (Form)	(Form)
Date: Affidavit <u>Sept. 4-1957</u> License <u>Sept. 4-1957-4:32P</u> Marriage <u>Sept. 4-1957-9:00P</u> Place of Marriage <u>Gaipost N.Y.</u>	(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)	Date: Affidavit <u>Sept. 4-1957</u> License <u>Sept. 4-1957-4:32P</u> Marriage <u>Sept. 4-1957-9:00P</u> Place of Marriage <u>Gaipost N.Y.</u>	(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official <u>Rev. Maurice Eugene Berry</u> Profession <u>Clergyman</u> Witness <u>Harry Francis Ewing, Gaipost N.Y.</u>	(Name and address of official) (Name and address of witness)	Official <u>Rev. Maurice Eugene Berry</u> Profession <u>Clergyman</u> Witness <u>Harry Francis Ewing, Gaipost N.Y.</u>	(Name and address of official) (Name and address of witness)
Period for solemnization of marriage begins at <u>4:32 P.M.</u> on the <u>4</u> day of <u>September</u> 19 <u>57</u> and ends the <u>2</u> day of <u>November</u> 19 <u>57</u>	(Time) (Day) (Month) (Year)	Period for solemnization of marriage begins at <u>4:32 P.M.</u> on the <u>4</u> day of <u>September</u> 19 <u>57</u> and ends the <u>2</u> day of <u>November</u> 19 <u>57</u>	(Time) (Day) (Month) (Year)

City Perinton County Monroe STATE OF NEW YORK No. 36

Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>David Francis Johnson</u>	Color <u>White</u>	Name <u>Maryna Deloise Simmons</u>	Color <u>White</u>
Residence <u>1931 Titus Ave Rochester N.Y.</u>	Age <u>25, July 23-1932</u>	Residence <u>76 Manhattan St. Rochester N.Y.</u>	Age <u>24, Feb. 1-1933</u>
Occupation <u>Wieser, Stromberg Calson</u>	No. of marriage <u>2nd</u>	Occupation <u>Russell Kelly Office Serv. Secretary</u>	No. of marriage <u>2nd</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead <u>living</u>	Birthplace <u>Elizabeth Town Penn.</u>	Former husband or husbands living or dead <u>living</u>
Father <u>Clarence Willis Johnson</u>	Divorced <u>yes</u>	Father <u>Calvin Malton Burkhat</u>	Divorced <u>yes</u>
Birthplace <u>U.S.</u>	" when <u>2-19-57</u>	Birthplace <u>U.S.</u>	" when <u>July 23, 26</u>
Mother <u>Vida Mary Honey</u>	" where <u>Germany</u>	Mother <u>Mary Elizabeth Bloodworth</u>	" where <u>Simmons</u>
Birthplace <u>U.S.</u>	" against whom <u>Germany</u>	Birthplace <u>U.S.</u>	" against whom <u>Germany</u>
Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y. Date 9-4-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta St. Rochester 20, N.Y. Date 9-4-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraai</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____	Relation Date	Consent by _____ Relation _____ Date _____	Relation Date
Consent by _____ Relation _____ Date _____	Relation Date	Consent by _____ Relation _____ Date _____	Relation Date
Proof of age _____ (Form)	(Form)	Proof of age _____ (Form)	(Form)
Date: Affidavit <u>Sept. 5-1957</u> License <u>Sept. 5-1957-8:00P</u> Marriage _____ M. Place of Marriage _____	(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)	Date: Affidavit <u>Sept. 5-1957</u> License <u>Sept. 5-1957-8:00P</u> Marriage _____ M. Place of Marriage _____	(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official _____ Profession _____ Witness _____	(Name and address of official) (Name and address of witness)	Official _____ Profession _____ Witness _____	(Name and address of official) (Name and address of witness)
Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19_____ and ends the _____ day of _____ 19_____	(Time) (Day) (Month) (Year)	Period for solemnization of marriage begins at _____ M. on the _____ day of _____ 19_____ and ends the _____ day of _____ 19_____	(Time) (Day) (Month) (Year)

RECORD OF MARRIAGES

mailed to State Dept. of Health 10-5-57
Reported State Com 10-3-57

City Perinton County Monroe STATE OF NEW YORK No. 37
Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>Frederick James Collins Jr</u>	Color <u>White</u>	Name <u>Penelope Jane Nichols</u>	Color <u>White</u>
Residence <u>243 Bradley St. Rochester N.Y.</u>	Age <u>23, Feb 10 1934</u>	Residence <u>10 Goodale St. Rochester N.Y.</u>	Age <u>19, Oct 13 1939</u>
Occupation <u>Driver's helper - Savings Co.</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Frederick James Collins Sr</u>	Divorced	Father <u>James Nichols</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Rochester</u>	" when
Mother <u>Beatrice Marie Tubbs</u>	" where	Mother <u>Grace</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Laboratories Rochester N.Y.</u> Date <u>9-5-57</u>	Date <u>9-5-57</u>	Laboratory Statement <u>Rochester Health Bureau Laboratories Rochester N.Y.</u> Date <u>9-5-57</u>	Date <u>9-5-57</u>
Physician's Statement <u>201 W. Monroe Ave. Rochester N.Y.</u> Date <u>9-4-57</u>	Date <u>9-4-57</u>	Physician's Statement <u>201 W. Monroe Ave. Rochester N.Y.</u> Date <u>9-4-57</u>	Date <u>9-4-57</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age <u>Birth record</u> (Form)	
Date: Affidavit <u>Sept 7-1957</u> License <u>Sept 7-1957 10:15 A</u> Marriage <u>Sept 8-1957 1:00 P</u> Place of Marriage <u>Rochester N.Y.</u>		Date: Affidavit <u>Sept 7-1957</u> License <u>Sept 7-1957 10:15 A</u> Marriage <u>Sept 8-1957 1:00 P</u> Place of Marriage <u>Rochester N.Y.</u>	
Official <u>William Quigley</u> Profession <u>Minister of the Gospel</u> Witness <u>William C. Stanton 1581 Oak Ave. Rochester N.Y.</u>		Official <u>William Quigley</u> Profession <u>Minister of the Gospel</u> Witness <u>William C. Stanton 1581 Oak Ave. Rochester N.Y.</u>	
Period for solemnization of marriage begins at <u>10:15 A.M.</u> on the <u>8</u> day of <u>September</u> 1957 and ends the <u>6</u> day of <u>November</u> 1957.		Period for solemnization of marriage begins at <u>10:15 A.M.</u> on the <u>8</u> day of <u>September</u> 1957 and ends the <u>6</u> day of <u>November</u> 1957.	

City Perinton County Monroe STATE OF NEW YORK No. 38
Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>Harold Richard Spaulding</u>	Color <u>White</u>	Name <u>Jean Beverly Schultz</u>	Color <u>White</u>
Residence <u>35 East Church St. Fairport N.Y.</u>	Age <u>28, Oct 21 1928</u>	Residence <u>303 Arnett Blvd. Rochester N.Y.</u>	Age <u>22, Mar 24 1935</u>
Occupation <u>Carpenter - Contractor</u>	No. of marriage <u>1st</u>	Occupation <u>Office Clerk - Bank</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Francis Walter Spaulding</u>	Divorced	Father <u>Vernon Adam Walter Schultz</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Florence Jane Warner</u>	" where	Mother <u>Lois Diver Roberts</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Robt. Health Bureau Lab. Dept. of Bacteriology</u> Date <u>8-30-57</u>	Date <u>8-30-57</u>	Laboratory Statement <u>The University of Robt. Medical School</u> Date <u>8-30-57</u>	Date <u>8-30-57</u>
Physician's Statement <u>Donald A. Morris 100 Broadway St. Rochester N.Y.</u> Date <u>8-28-57</u>	Date <u>8-28-57</u>	Physician's Statement <u>Donald A. Morris 100 Broadway St. Rochester N.Y.</u> Date <u>8-28-57</u>	Date <u>8-28-57</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 7-1957</u> License <u>Sept 7-1957 10:15 A</u> Marriage <u>Sept 14-1957 4:00 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Sept 7-1957</u> License <u>Sept 7-1957 10:15 A</u> Marriage <u>Sept 14-1957 4:00 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official <u>Earl W. Brien</u> Profession <u>Minister of the Gospel</u> Witness <u>William C. Holt 56 East Church St. Fairport N.Y.</u>		Official <u>Earl W. Brien</u> Profession <u>Minister of the Gospel</u> Witness <u>William C. Holt 56 East Church St. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>10:59 A.M.</u> on the <u>8</u> day of <u>September</u> 1957 and ends the <u>6</u> day of <u>November</u> 1957.		Period for solemnization of marriage begins at <u>10:59 A.M.</u> on the <u>8</u> day of <u>September</u> 1957 and ends the <u>6</u> day of <u>November</u> 1957.	

City Perinton County Monroe STATE OF NEW YORK No. 39
Clerk Ruth M. Gault

GROOM		BRIDE	
Name <u>Marion Clifford Clark</u>	Color <u>White</u>	Name <u>Margaret Louise McCasheen</u>	Color <u>White</u>
Residence <u>741 Cedar Hollow Baltimore Md.</u>	Age <u>23, May 20 1934</u>	Residence <u>70 South Main St. Fairport N.Y.</u>	Age <u>19, Feb 26 1938</u>
Occupation <u>Engineer - Bendix Radio</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Wilkeson D.C.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Marion Wilson Clark</u>	Divorced	Father <u>John Norman McCasheen</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Canada</u>	" when
Mother <u>Gulie Helmer Winstead</u>	" where	Mother <u>Margaret Louise Voelker</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Canada</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 135 E. Henrietta St. Rochester N.Y.</u> Date <u>8-27-57</u>	Date <u>8-27-57</u>	Laboratory Statement <u>Monroe County Laboratories 135 E. Henrietta St. Rochester N.Y.</u> Date <u>8-27-57</u>	Date <u>8-27-57</u>
Physician's Statement <u>Dr. M. McCasheen 70 South Main Fairport N.Y.</u> Date <u>8-25-57</u>	Date <u>8-25-57</u>	Physician's Statement <u>Dr. M. McCasheen 70 South Main Fairport N.Y.</u> Date <u>8-25-57</u>	Date <u>8-25-57</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth record</u> (Form)		Proof of age <u>Birth record</u> (Form)	
Date: Affidavit <u>Sept 9-57</u> License <u>Sept 9-1957 3:26 P</u> Marriage <u>Sept 14-1957 3:30 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Sept 9-57</u> License <u>Sept 9-1957 3:26 P</u> Marriage <u>Sept 14-1957 3:30 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official <u>Marion Brien</u> Profession <u>Minister of the Gospel</u> Witness <u>Neil James Casheen 70 S. Main Fairport N.Y.</u>		Official <u>Marion Brien</u> Profession <u>Minister of the Gospel</u> Witness <u>Neil James Casheen 70 S. Main Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>3:26 P.M.</u> on the <u>10</u> day of <u>September</u> 1957 and ends the <u>8</u> day of <u>November</u> 1957.		Period for solemnization of marriage begins at <u>3:26 P.M.</u> on the <u>10</u> day of <u>September</u> 1957 and ends the <u>8</u> day of <u>November</u> 1957.	

mailed to State Dept. of Health 10-5-57
Reported State Com 10-3-57

RECORD OF MARRIAGES

Reported 10-3-57
mailed to State Dept. of Health 10-5-57

City Perinton County Monroe STATE OF NEW YORK No. 40
Town Perinton
Clerk Richard M. Scully

GROOM
Name Steven Peter Spallio Color White
Residence 955 W. Linden Ave. East Rochester Age 19, Oct 7-1937
Occupation Apprentice - N.Y. Central No. of marriage 1st
Former wife or wives living or dead
Birthplace Rochester N.Y. Divorced
Father Steven Spallio " when
(Name of) " where
Mother Mattha Secosh " against whom
(Maiden name of)
Birthplace U.S.
Laboratory Statement 435 E. Henrietta St. Rochester N.Y. Date Sept 10-57
(Name and address of laboratory) (Test completed)
Physician's Statement 20 W. Church St. Fairport N.Y. Date Sept 6-57
(Name and address of physician) (Specimen taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by Mattha Spallio Relation Mother Date 9-12-57
Consent by Steve Spallio Relation Father Date 9-12-57
Proof of age Baptismal record
(Form)
Date: Affidavit Sept 12-1957 License Sept 12-57 5:02 P. Marriage Sept 14-1957 10:15 A.M. Place of Marriage Fairport N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official Richard A. Hoyt Profession Priest Witness Paul G. Cimicata, 217 East Chestnut St. East Rochester N.Y.
Period for solemnization of marriage begins at 5:02 P.M. on the 13 day of September 1957 and ends the 17 day of November 1957

BRIDE
Name Catherine Staluto Color White
Residence 70 High St. Fairport N.Y. Age 24, Feb 28-1933
Occupation Student - Hays Methodist School No. of marriage 1st
Former husband or husbands living or dead
Birthplace Fairport N.Y. Divorced
Father Frank Staluto " when
(Name of) " where
Mother Conetta De Sini " against whom
(Maiden name of)
Birthplace U.S.
Laboratory Statement 435 E. Henrietta St. Rochester N.Y. Date 9-30-57
(Name and address of laboratory) (Test completed)
Physician's Statement 20 W. Church St. Fairport N.Y. Date 8-27-57
(Name and address of physician) (Specimen taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____
(Form)
Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)

Reported 10-3-57
mailed to State Dept. of Health 10-5-57

City Perinton County Monroe STATE OF NEW YORK No. 41
Town Perinton
Clerk Elizabeth H. Greise

GROOM
Name James Charles Muzka Color White
Residence Hammans Es. Fairport N.Y. Age 23, March 15-1934
Occupation Driftman - Tolson No. of marriage 1st
Former wife or wives living or dead
Birthplace Camden N.J. Divorced
Father Sam Muzka " when
(Name of) " where
Mother Sophie Salapi " against whom
(Maiden name of)
Birthplace Ukraine
Laboratory Statement 435 E. Henrietta St. Rochester N.Y. Date 9-6-57
(Name and address of laboratory) (Test completed)
Physician's Statement 20 W. Church St. Fairport N.Y. Date 9-3-57
(Name and address of physician) (Specimen taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____
(Form)
Date: Affidavit Sept 14-1957 License Sept 14-1957 10:20 P. Marriage Sept 14-1957 10:00 A. Place of Marriage Fairport N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official Richard A. Hoyt Profession Catholic Priest Witness Theodore G. Muzka - 2111 N. 11th St. Lincoln
Period for solemnization of marriage begins at 10:31 A.M. on the 15 day of September 1957 and ends the 18 day of November 1957

BRIDE
Name Elizabeth Louise Allen Color White
Residence 121 Shorecliff St. Rochester N.Y. Age 22, Apr 9-1935
Occupation Clack Typist Kodak Co. No. of marriage 1st
Former husband or husbands living or dead
Birthplace Rochester N.Y. Divorced
Father Willie Sylvester Allen " when
(Name of) " where
Mother Quitt Marie Clark " against whom
(Maiden name of)
Birthplace U.S.
Laboratory Statement 435 E. Henrietta St. Rochester N.Y. Date 9-6-57
(Name and address of laboratory) (Test completed)
Physician's Statement 20 W. Church St. Fairport N.Y. Date 9-3-57
(Name and address of physician) (Specimen taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____
(Form)
Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)

Reported 10-3-57
mailed to State Dept. of Health 10/5/57

City Perinton County Monroe STATE OF NEW YORK No. 42
Town Perinton
Clerk Elizabeth H. Greise

GROOM
Name Richard Lee Owens Color White
Residence RR #2, Bloomington Age 27, 7-11-1930
Occupation Salesman, Bidding Supply No. of marriage 1st
Former wife or wives living or dead
Birthplace Bloomington, Indiana Divorced
Father Samuel Isaac Owens " when
(Name of) " where
Mother Bessie Blanchette " against whom
(Maiden name of)
Birthplace U.S.
Laboratory Statement 1330 W. Michigan Blvd. D.D. Ind Date 8-20-57
(Name and address of laboratory) (Test completed)
Physician's Statement 306 E. Kirkwood Bloomington Date 8-19-57
(Name and address of physician) (Specimen taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____
(Form)
Date: Affidavit Sept 16-1957 License Sept 16-57 11:50 A Marriage Sept 18-1957 7:00 P.M. Place of Marriage Fairport N.Y.
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)
Official Richard A. Hoyt Profession Clergyman Witness Samuel L. Owens, Champain, Ill.
Period for solemnization of marriage begins at 11:50 A.M. on the 17 day of September 1957 and ends the 15 day of November 1957

BRIDE
Name Mary Louise Andrews Color White
Residence 12 Pleasant St. Fairport N.Y. Age 28, 4-22-1929
Occupation at home No. of marriage 1st
Former husband or husbands living or dead
Birthplace Buffalo N.Y. Divorced
Father Arthur Mitchell Andrews " when
(Name of) " where
Mother Blenda Marie Sun " against whom
(Maiden name of)
Birthplace U.S.
Laboratory Statement 435 E. Henrietta St. Rochester N.Y. Date 9-6-57
(Name and address of laboratory) (Test completed)
Physician's Statement 10 Post Church St. Fairport N.Y. Date 9-3-57
(Name and address of physician) (Specimen taken)
Examination requirements Were not dispensed with by judge or justice
(Were or were not)
Consent by _____ Relation _____ Date _____
Consent by _____ Relation _____ Date _____
Proof of age _____
(Form)
Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)

RECORD OF MARRIAGES

Registered 10-3-57
mailed to State Dept. of Health 10/15/57

City Perinton County Monroe STATE OF NEW YORK No. 42
Clerk Elizabeth H. Paine

GROOM		BRIDE	
Name <u>Byron Monroe Ellsworth</u>	Color <u>White</u>	Name <u>Mary Joanne Schodmatt</u>	Color <u>White</u>
Residence <u>760 Monroey Rd Fairport N.Y.</u>	Age <u>25 June 30-1932</u>	Residence <u>111 West Ave Fairport N.Y.</u>	Age <u>19 Nov 25-1937</u>
Occupation <u>Operating Engineer - Const</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary Sales Office - Con Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Victor N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Byron Bennett Ellsworth</u>	Divorced	Father <u>John Schodmatt</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Mary Klossman</u>	" where	Mother <u>Nettie Lorena Westerman</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>9-10-57</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>9-10-57</u>
Physician's Statement <u>John Kraus Fairport N.Y.</u>	Date <u>9-5-57</u>	Physician's Statement <u>John Kraus Fairport N.Y.</u>	Date <u>9-5-57</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 20-1957</u> License <u>Sept 20-1957-7:19 P.</u> Marriage <u>Sept 28-1957-1:00 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Sept 20-1957</u> License <u>Sept 20-1957-7:19 P.</u> Marriage <u>Sept 28-1957-1:00 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official <u>George M. Davis</u> Profession <u>Clergyman</u> Witness <u>Ronald Blewett - 46 Monroey Rd Fairport N.Y.</u>		Official <u>George M. Davis</u> Profession <u>Clergyman</u> Witness <u>Ronald Blewett - 46 Monroey Rd Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>7:19 P. M.</u> on the <u>21</u> day of <u>September</u> 19 <u>57</u> and ends the <u>19</u> day of <u>November</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>7:19 P. M.</u> on the <u>21</u> day of <u>September</u> 19 <u>57</u> and ends the <u>19</u> day of <u>November</u> 19 <u>57</u>	

Registered 10-3-57
mailed to State Dept. of Health 10/15/57

City Perinton County Monroe STATE OF NEW YORK No. 44
Clerk Elizabeth H. Paine

GROOM		BRIDE	
Name <u>Harold Ray De Witt</u>	Color <u>White</u>	Name <u>Patricia Maye Jensen</u>	Color <u>White</u>
Residence <u>Kittering Rd Macedon N.Y.</u>	Age <u>23 Dec 25-1933</u>	Residence <u>1942 Tuck Hill Rd Perinton</u>	Age <u>19 Mar 14-1938</u>
Occupation <u>Truck Driver Construction</u>	No. of marriage <u>1st</u>	Occupation <u>Clinical Beer Manufacturing</u>	No. of marriage <u>1st</u>
Birthplace <u>Macedon N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Oliver De Witt</u>	Divorced	Father <u>Olmer Christian Jensen</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Gemma Morrison</u>	" where	Mother <u>Maye Clements</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>9-6-57</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>9-6-57</u>
Physician's Statement <u>John Kraus Fairport N.Y.</u>	Date <u>9-3-57</u>	Physician's Statement <u>John Kraus Fairport N.Y.</u>	Date <u>9-3-57</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 21-1957</u> License <u>Sept 21-1957-11:55 P.</u> Marriage <u>Sept 28-1957-3 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Sept 21-1957</u> License <u>Sept 21-1957-11:55 P.</u> Marriage <u>Sept 28-1957-3 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official <u>George M. Davis</u> Profession <u>Clergyman</u> Witness <u>Harold R. De Witt - 847 West State Ave Macedon N.Y.</u>		Official <u>George M. Davis</u> Profession <u>Clergyman</u> Witness <u>Harold R. De Witt - 847 West State Ave Macedon N.Y.</u>	
Period for solemnization of marriage begins at <u>11:59 A. M.</u> on the <u>22</u> day of <u>September</u> 19 <u>57</u> and ends the <u>20</u> day of <u>November</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>11:59 A. M.</u> on the <u>22</u> day of <u>September</u> 19 <u>57</u> and ends the <u>20</u> day of <u>November</u> 19 <u>57</u>	

Registered 10-3-57
mailed to State Dept. of Health 10/15/57

City Perinton County Monroe STATE OF NEW YORK No. 45
Clerk Rita M. Conley

GROOM		BRIDE	
Name <u>Joseph Edmund Fitzgerald</u>	Color <u>White</u>	Name <u>Minnie Joanne Kelle Thompson</u>	Color <u>White</u>
Residence <u>201 E. Commercial St Fairport N.Y.</u>	Age <u>24 June 6-1933</u>	Residence <u>212 N. Ashfield Ave East Rochester</u>	Age <u>24 May 25-1938</u>
Occupation <u>Tableting Oper. Engineering</u>	No. of marriage <u>1st</u>	Occupation <u>Assembly Stenographer - Cadillac</u>	No. of marriage <u>2nd</u>
Birthplace <u>Fairport N.Y.</u>	Former wife or wives living or dead	Birthplace <u>North Orwell, Penn</u>	Former husband or husbands living or dead
Father <u>JAMES PATRICK FITZGERALD</u>	Divorced	Father <u>James Morgan Thompson</u>	Divorced, Annulment
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when <u>December 5-1956</u>
Mother <u>Mona Knight</u>	" where	Mother <u>Katherine Bell Clark</u>	" where <u>Rochester N.Y.</u>
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom <u>John Kelle</u>
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>9-21-57</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd Rochester N.Y.</u>	Date <u>9-21-57</u>
Physician's Statement <u>John Kraus Fairport N.Y.</u>	Date <u>9-19-57</u>	Physician's Statement <u>John Kraus Fairport N.Y.</u>	Date <u>9-18-57</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 20-1957</u> License <u>Sept 25-1957-3:23 P.</u> Marriage <u>Sept 29-1957-2:30 P.</u> Place of Marriage <u>East Rochester N.Y.</u>		Date: Affidavit <u>Sept 20-1957</u> License <u>Sept 25-1957-3:23 P.</u> Marriage <u>Sept 29-1957-2:30 P.</u> Place of Marriage <u>East Rochester N.Y.</u>	
Official <u>Carl T. Wickham</u> Profession <u>Clergyman</u> Witness <u>James A. Fitzgerald - 201 E. Commercial St Fairport N.Y.</u>		Official <u>Carl T. Wickham</u> Profession <u>Clergyman</u> Witness <u>James A. Fitzgerald - 201 E. Commercial St Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>3:13 P. M.</u> on the <u>26</u> day of <u>September</u> 19 <u>57</u> and ends the <u>24</u> day of <u>November</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>3:13 P. M.</u> on the <u>26</u> day of <u>September</u> 19 <u>57</u> and ends the <u>24</u> day of <u>November</u> 19 <u>57</u>	

RECORD OF MARRIAGES

mailed to State Dept. of Health 10/3-57
mailed to State Dept. of Health 10/5/57
mailed to State Dept. of Health 11/5/57
mailed to State Dept. of Health 10-3-57
mailed to State Dept. of Health 10/5/57

City Perinton County Monroe STATE OF NEW YORK No. 46
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Thomas Otterman Simola</u>	Color <u>White</u>	Name <u>Beverly Ann Dyer</u>	Color <u>White</u>
Residence <u>831 Tenth Rd. Fairport N.Y.</u>	Age <u>22, Feb. 27-1935</u>	Residence <u>13 Parker St. Fairport N.Y.</u>	Age <u>18, Sept. 26-1939</u>
Occupation <u>Salesman - Car Shop</u>	No. of marriage <u>1st</u>	Occupation <u>At home</u>	No. of marriage <u>1st</u>
Birthplace <u>Brighton N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>loyd Harmon Simola</u>	Divorced	Father <u>Kenneth Milton Dyer</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Glennice Pearl Theron</u>	" where	Mother <u>Betty May Campbell</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 9-20-57</u>	Date <u>9-20-57</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 9-20-57</u>	Date <u>9-20-57</u>
Physician's Statement <u>John K. Kras Fairport N.Y. Date 9-16-57</u>	Date <u>9-16-57</u>	Physician's Statement <u>John K. Kras Fairport N.Y. Date 9-16-57</u>	Date <u>9-16-57</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept. 26-1957</u> License <u>Sept. 26-1957</u> Marriage <u>Sept. 28-1957, 11:00 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Sept. 26-1957</u> License <u>Sept. 26-1957</u> Marriage <u>Sept. 28-1957, 11:00 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official: <u>Richard A. Hoyt</u> Profession <u>Clergyman</u>		Official: <u>Richard A. Hoyt</u> Profession <u>Clergyman</u>	
Witness: <u>Calvin Charles Sauter - 483 Pamel Rd. Fairport N.Y.</u>		Witness: <u>Calvin Charles Sauter - 483 Pamel Rd. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>10:59 A.M.</u> on the <u>27</u> day of <u>September</u> 19 <u>57</u> and ends the <u>25</u> day of <u>November</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>10:59 A.M.</u> on the <u>27</u> day of <u>September</u> 19 <u>57</u> and ends the <u>25</u> day of <u>November</u> 19 <u>57</u>	

City Perinton County Monroe STATE OF NEW YORK No. 47
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Francis Joseph Pease</u>	Color <u>White</u>	Name <u>Gene Minnie Cook</u>	Color <u>White</u>
Residence <u>13 Tenth St. Fairport N.Y.</u>	Age <u>24, Dec. 27-1932</u>	Residence <u>122 N. Main St. Fairport N.Y.</u>	Age <u>19, June 27-1938</u>
Occupation <u>Machinist - Small Parts</u>	No. of marriage <u>1st</u>	Occupation <u>At home</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Fairfield N.Y.</u>	Former husband or husbands living or dead.
Father <u>Frank Joseph Pease</u>	Divorced	Father <u>Ronald Lewis Cook</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Alida Katherine Demee</u>	" where	Mother <u>Wilet May Wilhelm</u>	" where
Birthplace <u>Holland</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 9-20-57</u>	Date <u>9-20-57</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 9-20-57</u>	Date <u>9-20-57</u>
Physician's Statement <u>John K. Kras Fairport N.Y. Date 9-16-57</u>	Date <u>9-16-57</u>	Physician's Statement <u>John K. Kras Fairport N.Y. Date 9-16-57</u>	Date <u>9-16-57</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Sept 26-1957</u> License <u>Sept 26-1957</u> Marriage <u>Oct 5-1957, 10:00 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Sept 26-1957</u> License <u>Sept 26-1957</u> Marriage <u>Oct 5-1957, 10:00 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official: <u>Richard A. Hoyt</u> Profession <u>Priest</u>		Official: <u>Richard A. Hoyt</u> Profession <u>Priest</u>	
Witness: <u>Barbara Heckman, 122 N. Main St. Fairport N.Y.</u>		Witness: <u>Barbara Heckman, 122 N. Main St. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>5:04 P.M.</u> on the <u>27</u> day of <u>September</u> 19 <u>57</u> and ends the <u>25</u> day of <u>November</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>5:04 P.M.</u> on the <u>27</u> day of <u>September</u> 19 <u>57</u> and ends the <u>25</u> day of <u>November</u> 19 <u>57</u>	

City Perinton County Monroe STATE OF NEW YORK No. 48
 Clerk Elizabeth H. Pease

GROOM		BRIDE	
Name <u>Robert Lee West</u>	Color <u>White</u>	Name <u>Mary Florence Capanna</u>	Color <u>White</u>
Residence <u>217 East Ave. East Rochester N.Y.</u>	Age <u>21, May 28-1936</u>	Residence <u>16 Elm St. Fairport N.Y.</u>	Age <u>18, Sept. 5-1939</u>
Occupation <u>Garage Worker Car Agency</u>	No. of marriage <u>1st</u>	Occupation <u>At home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Brighton N.Y.</u>	Former husband or husbands living or dead.
Father <u>John Emerson West</u>	Divorced	Father <u>Nicola Capanna</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Eva Ethel Brown</u>	" where	Mother <u>Ernestine Luciano</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 9-24-57</u>	Date <u>9-24-57</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 9-24-57</u>	Date <u>9-24-57</u>
Physician's Statement <u>John K. Kras Fairport N.Y. Date 9-20-57</u>	Date <u>9-20-57</u>	Physician's Statement <u>John K. Kras Fairport N.Y. Date 9-20-57</u>	Date <u>9-20-57</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>birth record</u> (Form)		Proof of age <u>Birth record</u> (Form)	
Date: Affidavit <u>Sept. 27-1957</u> License <u>Sept. 27-1957</u> Marriage <u>Sept. 28-1957, 10:00 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Sept. 27-1957</u> License <u>Sept. 27-1957</u> Marriage <u>Sept. 28-1957, 10:00 A.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official: <u>Richard A. Hoyt</u> Profession <u>Priest</u>		Official: <u>Richard A. Hoyt</u> Profession <u>Priest</u>	
Witness: <u>Sophie E. Brooks - 104 Pine Ave. Fairport N.Y.</u>		Witness: <u>Sophie E. Brooks - 104 Pine Ave. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>28</u> day of <u>September</u> 19 <u>57</u> and ends the <u>26</u> day of <u>November</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>28</u> day of <u>September</u> 19 <u>57</u> and ends the <u>26</u> day of <u>November</u> 19 <u>57</u>	

RECORD OF MARRIAGES

Registered State Com 11-1-57

Mailed to State Dept. of Health 11/5/57

City Perinton County Monroe STATE OF NEW YORK No. 49
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>John Richard Clifford</u>	Color <u>White</u>	Name <u>Jean Elizabeth Prescott</u>	Color <u>White</u>
Residence <u>249 S. Main St. Fairport N.Y.</u>	Age <u>22, Jan 8 1934</u>	Residence <u>195 Jefferson Ave Fairport</u>	Age <u>21, Aug 24 1936</u>
Occupation <u>Salesman, Automobile</u>	No. of marriage <u>1st</u>	Occupation <u>General Office Work - Kodak Park</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport N.Y.</u>	Former husband or husbands living or dead
Father <u>Calton John Clifford</u>	Divorced	Father <u>William Prescott</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>England</u>	" when
Mother <u>Aileen Maria Post</u>	" where	Mother <u>Elizabeth Turner</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>England</u>	" against whom
Laboratory Statement <u>Monroe County Laboratory 435 E. Henrietta Rd. Rochester N.Y. Date 10-1-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratory 435 E. Henrietta Rd. Rochester N.Y. Date 10-1-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Dr. J. Mc Carhan 302 S. Main St. Fairport N.Y. Date 9-25-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraci Fairport N.Y. Date 9-26-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Automobile driver's license</u>	(Form)	Proof of age <u>Automobile driver's license</u>	(Form)
Date: Affidavit <u>Oct 3 1957</u> License <u>Oct 3 1957 3:35 P</u> Marriage <u>Oct 12 1957 11:00 A</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Oct 12 1957</u> License <u>Oct 12 1957 11:00 A</u> Marriage <u>Oct 12 1957 11:00 A</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Richard A. Host 20 East Ave. Fairport N.Y. Profession Priest</u>	(Name and address of official) (Specimen taken)	Official <u>John P. Treu, 8 Seneca St. C. Rochester N.Y.</u>	(Name and address of official) (Specimen taken)
Period for solemnization of marriage begins at <u>3:35 P.M.</u> on the <u>4</u> day of <u>October</u> 19 <u>57</u> and ends the <u>2</u> day of <u>December</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>11:02 A.M.</u> on the <u>5</u> day of <u>October</u> 19 <u>57</u> and ends the <u>3</u> day of <u>December</u> 19 <u>57</u>	

Registered State Com 11-1-57

Mailed to State Dept. of Health 11/5/57

City Perinton County Monroe STATE OF NEW YORK No. 50
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Stephen Drajah</u>	Color <u>White</u>	Name <u>Mary Catherine O'Brien</u>	Color <u>White</u>
Residence <u>950 Linden Ave. East Rochester N.Y.</u>	Age <u>27, Jan 25 1930</u>	Residence <u>345 Elmwood St. East Rochester N.Y.</u>	Age <u>20, Mar 12 1937</u>
Occupation <u>Mach. Asst. at Kodak Co.</u>	No. of marriage <u>1st</u>	Occupation <u>Typist - Kodak Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>John Drajah</u>	Divorced	Father <u>Patrick Stewart O'Brien</u>	Divorced
Birthplace <u>Baltimore</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Fannie Prentiss</u>	" where	Mother <u>Margaret Lucille Lehan</u>	" where
Birthplace <u>Quebec</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratory 435 E. Henrietta Rd. Rochester N.Y. Date 9-27-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratory 435 E. Henrietta Rd. Rochester N.Y. Date 9-27-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>3621 Lake Ave. Rochester 12, N.Y. Date 9-24-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>3621 Lake Ave. Rochester 12, N.Y. Date 9-24-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____	(Form)	Proof of age <u>Birth record</u>	(Form)
Date: Affidavit <u>October 4 1957</u> License <u>Oct 4 1957 11:02 A</u> Marriage <u>Oct 12 1957 10:00 A.M.</u> Place of Marriage <u>Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Oct 12 1957</u> License <u>Oct 12 1957 10:00 A.M.</u> Marriage <u>Oct 12 1957 10:00 A.M.</u> Place of Marriage <u>Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Am. Nicholas Wolenski 303 Hudson Ave. Rochester, N.Y. Profession Catholic Priest</u>	(Name and address of official) (Specimen taken)	Official <u>John P. Treu, 8 Seneca St. C. Rochester N.Y.</u>	(Name and address of official) (Specimen taken)
Period for solemnization of marriage begins at <u>11:02 A.M.</u> on the <u>5</u> day of <u>October</u> 19 <u>57</u> and ends the <u>3</u> day of <u>December</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>11:02 A.M.</u> on the <u>5</u> day of <u>October</u> 19 <u>57</u> and ends the <u>3</u> day of <u>December</u> 19 <u>57</u>	

Registered State Com 11-1-57

Mailed to State Dept. of Health 11/5/57

City Perinton County Monroe STATE OF NEW YORK No. 51
Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Richard Amato Felix</u>	Color <u>White</u>	Name <u>Anna Schillaci</u>	Color <u>White</u>
Residence <u>84 High St. Fairport N.Y.</u>	Age <u>25, March 16 1932</u>	Residence <u>224 West 1st St. East Rochester N.Y.</u>	Age <u>20, Feb 12 1937</u>
Occupation <u>Meat Cutter, Felix Market</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Italy</u>	Former husband or husbands living or dead
Father <u>George Felix</u>	Divorced	Father <u>Onofio Schillaci</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Helen Trullo</u>	" where	Mother <u>Siordanna Cattone</u>	" where
Birthplace <u>U.S.A.</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Monroe County Laboratory 435 E. Henrietta Rd. Rochester N.Y. Date 9-24-1957</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monroe County Laboratory 435 E. Henrietta Rd. Rochester N.Y. Date 9-24-1957</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Dr. J. Mc Carhan 302 S. Main St. Fairport N.Y. Date 9-21-1957</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>Dr. J. Mc Carhan 302 S. Main St. Fairport N.Y. Date 9-20-1957</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____	(Form)	Proof of age <u>Birth record</u>	(Form)
Date: Affidavit <u>October 10 1957</u> License <u>Oct 10 1957 1:30 P</u> Marriage <u>Oct 19 1957 11:00 A</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Oct 19 1957</u> License <u>Oct 19 1957 11:00 A</u> Marriage <u>Oct 19 1957 11:00 A</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>John J. Schillaci 224 W. 1st St. East Rochester N.Y. Profession Roman Catholic Priest</u>	(Name and address of official) (Specimen taken)	Official <u>John J. Schillaci 224 W. 1st St. East Rochester N.Y. Profession Roman Catholic Priest</u>	(Name and address of official) (Specimen taken)
Period for solemnization of marriage begins at <u>1:30 P.M.</u> on the <u>11</u> day of <u>October</u> 19 <u>57</u> and ends the <u>9</u> day of <u>December</u> 19 <u>57</u>		Period for solemnization of marriage begins at <u>1:30 P.M.</u> on the <u>11</u> day of <u>October</u> 19 <u>57</u> and ends the <u>9</u> day of <u>December</u> 19 <u>57</u>	

RECORD OF MARRIAGES

Reported state com 11-1-57
mailed to State Dept. P Health 11/5/57

City Perinton County Monroe STATE OF NEW YORK No. 52
 Clerk Deborah H. Burre

GROOM		BRIDE	
Name <u>Anthony Russell Bataletta</u>	Color <u>White</u>	Name <u>Bonny Ann Givengood</u>	Color <u>White</u>
Residence <u>49 State St Fairport N.Y.</u>	Age <u>32 Feb 24 1925</u>	Residence <u>139 E. East Main St. Rochester N.Y.</u>	Age <u>23 Sept 2 1934</u>
Occupation <u>Mail carrier U.S. Gov.</u>	No. of marriage <u>2nd</u>	Occupation <u>Secretary, Bank</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport N.Y.</u>	Former wife or wives living or dead <u>Living</u>	Birthplace <u>Hornell N.Y.</u>	Former husband or husbands living or dead
Father <u>Salvatore Bataletta</u>	Divorced <u>Annulled</u>	Father <u>Russell Chase Givengood</u>	Divorced
Birthplace <u>Italy</u>	" when <u>July 15 1957</u>	" where <u>U.S.</u>	" when
Mother <u>Stella Sambataro</u>	" where <u>Monaca East</u>	" where <u>St. Gladys Euille Emerson</u>	" where
Birthplace <u>Italy</u>	against whom <u>Joseph C. Bataletta</u>	" against whom	
Laboratory Statement <u>Monaca County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 10-4-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monaca County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 10-4-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>George A. Dean 11 W. Church St. Fairport N.Y. Date 9-30-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>George A. Dean 11 W. Church St. Fairport N.Y. Date 9-30-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Oct 19 1957</u> License <u>Oct 19 1957 9:24 A</u> Marriage <u>Oct 26 1957 7:00 P.M.</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>John T. Williams</u> Profession <u>Clergyman</u>	(Specimen taken)	Official <u>John T. Williams</u> Profession <u>Clergyman</u>	(Specimen taken)
Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>20</u> day of <u>October</u> 1957 and ends the <u>18</u> day of <u>December</u> 1957		Period for solemnization of marriage begins at _____ on the _____ day of _____ 1957 and ends the _____ day of _____ 1957	

Reported state com 11-1-57
mailed to State Dept. P Health 11/5/57

City Perinton County Monroe STATE OF NEW YORK No. 53
 Clerk Ruth M. Bouby

GROOM		BRIDE	
Name <u>Phillip Leo Marvin</u>	Color <u>White</u>	Name <u>Norma Irene McDonnell</u>	Color <u>White</u>
Residence <u>611 Main St. East Rochester N.Y.</u>	Age <u>21 Oct 20 1936</u>	Residence <u>2nd Rd. Town of Perinton N.Y.</u>	Age <u>20 Jan 23 1937</u>
Occupation <u>Farmer - Partnership</u>	No. of marriage <u>1st</u>	Occupation <u>Nurse - St. Mary's</u>	No. of marriage <u>1st</u>
Birthplace <u>Canandaigua N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Edmund H. Marvin</u>	Divorced	Father <u>Thomas McDonnell</u>	Divorced
Birthplace <u>U.S.</u>	" when	" where <u>U.S.</u>	" when
Mother <u>Rosina Weisenberge</u>	" where <u>U.S.</u>	" where <u>U.S.</u>	" where
Birthplace <u>U.S.</u>	against whom	" against whom	
Laboratory Statement <u>Monaca County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 10-1-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monaca County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 10-1-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai Fairport N.Y. Date 9-26-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraai Fairport N.Y. Date 9-26-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth record</u> (Form)		Proof of age <u>Birth record</u> (Form)	
Date: Affidavit <u>Oct 21 1957</u> License <u>Oct 21 1957 2:10 P</u> Marriage <u>Oct 22 1957 11:00 A.M.</u> Place of Marriage <u>Pittsford N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>James J. Marvin</u> Profession <u>Catholic Priest</u>	(Specimen taken)	Official <u>John H. Marvin - Madison N.Y.</u> Profession <u>John H. Marvin - Madison N.Y.</u>	(Specimen taken)
Period for solemnization of marriage begins at <u>2:01 P.M.</u> on the <u>22</u> day of <u>October</u> 1957 and ends the <u>20</u> day of <u>December</u> 1957		Period for solemnization of marriage begins at _____ on the _____ day of _____ 1957 and ends the _____ day of _____ 1957	

Reported state com 11-1-57
mailed to State Dept. P Health 11/5/57

City Perinton County Monroe STATE OF NEW YORK No. 54
 Clerk Ruth M. Bouby

GROOM		BRIDE	
Name <u>James Oscar Merish</u>	Color <u>White</u>	Name <u>Shirley Maxine Kie</u>	Color <u>White</u>
Residence <u>309 W. Spring St. East Rochester N.Y.</u>	Age <u>30 June 7 1927</u>	Residence <u>135 W. Church St. Fairport N.Y.</u>	Age <u>28 Nov 3 1928</u>
Occupation <u>Truck driver - Bulk Carting</u>	No. of marriage <u>2nd</u>	Occupation <u>Waitress - Fullerton Dine</u>	No. of marriage <u>1st</u>
Birthplace <u>East Rochester N.Y.</u>	Former wife or wives living or dead <u>Living</u>	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Raymond Merish</u>	Divorced <u>yes</u>	Father <u>Maxwell C. Kie</u>	Divorced
Birthplace <u>Canada</u>	" when <u>June 1 1957</u>	" where <u>New York</u>	" when
Mother <u>Mary Fanning</u>	" where <u>Rochester N.Y.</u>	" where <u>New York</u>	" where
Birthplace <u>New York</u>	against whom <u>John Merish</u>	" against whom	
Laboratory Statement <u>Monaca County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 10-22-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Monaca County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 10-22-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai Fairport N.Y. Date 10-18-57</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraai Fairport N.Y. Date 10-18-57</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Oct 30 1957</u> License <u>Oct 30 1957 1:57 P</u> Marriage <u>Nov 2 1957 3:30 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____	(Month) (Day) (Year) (Hour)
Official <u>John Kraai Fairport N.Y.</u> Profession <u>Clergyman</u>	(Specimen taken)	Official <u>John Kraai Fairport N.Y.</u> Profession <u>Clergyman</u>	(Specimen taken)
Period for solemnization of marriage begins at <u>1:15 P.M.</u> on the <u>31</u> day of <u>October</u> 1957 and ends the <u>29</u> day of <u>December</u> 1957		Period for solemnization of marriage begins at _____ on the _____ day of _____ 1957 and ends the _____ day of _____ 1957	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 55
Town Perinton
Clerk Ruth M. Bouddy

Registered State Com 12-2-57
mailed to State Dept 8/11/57

GROOM

Name Dary Eugene Stubbings Color White
 Residence 58 East Ave Fairport N.Y. Age 18, Dec 29-1938
 Occupation Teacher American Canal No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father William Messerino Divorced
 Birthplace U.S. " when
 Mother Autta Lois Stubbings " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date 10-25-57
 435 E. Henrietta St. Rochester 20 N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement Dr. J. J. McCaughy - 705 Main St. Fairport N.Y. Date 10-22-57
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by Ruth M. Bouddy Relation Mother Date 11-4-57
 (Guardian)
 Consent by _____ Relation _____ Date _____
 Proof of age Automobile driver's license (Form)

BRIDE

Name Joan Elaine Chinelli Color White
 Residence 335 E. Henrietta St. Fairport N.Y. Age 18, April 4-1939
 Occupation At home No. of marriage 1st
 Birthplace Fairport N.Y. Former husband or husbands living or dead
 Father Louis Chinelli Divorced
 Birthplace U.S. " when
 Mother Dena Anna Brusconi " where
 Birthplace Italy " against whom
 Laboratory Statement Monroe County Laboratories Date 10-25-57
 435 E. Henrietta St. Rochester 20 N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement Dr. J. J. McCaughy - 705 Main St. Fairport N.Y. Date 10-22-57
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Birth record (Form)

Date: Affidavit Nov 4-1957 License Nov 4-1957 5:04 P Marriage Nov 3-1957 3:30 P.M. Place of Marriage Rochester N.Y.
 Rev. Paul B. Goodalle (Month) (Day) (Year) (Hour) Paul H. Chinelli - 192 Adams St. Rochester N.Y.
 Official 622 Howard St. Rochester N.Y. Profession Judge of City Court Witness Joseph A. Chinelli 69 Adams St. Rochester N.Y.
 Period for solemnization of marriage begins at 5:04 P.M. on the 5 day of November 1957 and ends the 3 day of January 1958

City Perinton County Monroe STATE OF NEW YORK No. 56
Town Perinton
Clerk Elizabeth H. Sessa

Registered State Com 12-2-57
mailed to State Dept 8/11/57

GROOM

Name Donald Richard Checho Color White
 Residence Wenden St. East Rochester N.Y. Age 22, Mar 3-1935
 Occupation Student - College No. of marriage 1st
 Birthplace East Rochester N.Y. Former wife or wives living or dead
 Father Salas Checho Divorced
 Birthplace Austria " when
 Mother Sada S. Siforabi " where
 Birthplace Austria " against whom
 Laboratory Statement Monroe County Laboratories Date Nov 13-57
 435 E. Henrietta St. Rochester N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Kraai Fairport N.Y. Date Nov 9-57
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Mary Jane Albert Color White
 Residence 327 E. Commercial St. East Rochester N.Y. Age 22, Jan 29-1935
 Occupation Tuffin Manufacturing Co. No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father Elmer Frederick Albert Divorced
 Birthplace U.S. " when
 Mother Lois Lorraine Littlefield " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date Nov 13-57
 435 E. Henrietta St. Rochester N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Kraai Fairport N.Y. Date Nov 9-57
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit Nov 22-1957 License Nov 22-1957 5:04 P Marriage Nov 24-1957 10:00 A Place of Marriage East Rochester N.Y.
 Rev. Paul B. Goodalle (Month) (Day) (Year) (Hour) Barbara S. Sady - 411 East 5th East Rochester N.Y.
 Official 627 S. Highland St. East Rochester N.Y. Profession Catholic Priest Witness Max Barbara Sady 415 E. 5th St. Rochester N.Y.
 Period for solemnization of marriage begins at 5:02 P.M. on the 23 day of November 1957 and ends the 21 day of January 1958

City Perinton County Monroe STATE OF NEW YORK No. 57
Town Perinton
Clerk Elizabeth H. Sessa

Registered State Com 12-2-57
mailed to State Dept 8/11/57

GROOM

Name Wayne Lawrence Brooks Color White
 Residence 29 Perin St. Fairport N.Y. Age 23, Feb 12-1932
 Occupation Offic. Work Manufacturing No. of marriage 1st
 Birthplace Plainfield N.J. Former wife or wives living or dead
 Father Elmer Francis Brooks Sr Divorced
 Birthplace U.S. " when
 Mother Berjietta Chen Fitzgarris " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date Nov 19-1957
 435 E. Henrietta St. Rochester 20 N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Kraai Fairport N.Y. Date Nov 17-1957
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Patsy Ann Small Color White
 Residence Hilton N.Y. Age 23, May 3-1934
 Occupation Offic. Work - Kodak No. of marriage 1st
 Birthplace Hilton N.Y. Former husband or husbands living or dead
 Father Charles T. Charles Bull Divorced
 Birthplace U.S. " when
 Mother Julietta Mary Turgon " where
 Birthplace Canada " against whom
 Laboratory Statement Monroe County Laboratories Date Nov 19-1957
 435 E. Henrietta St. Rochester N.Y. (Name and address of laboratory) (Test completed)
 Physician's Statement John Kraai Fairport N.Y. Date Nov 17-1957
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit Nov 24-1957 License Nov 24-1957 2 P Marriage Nov 30-1957 11:00 A Place of Marriage Hilton N.Y.
 Rev. Paul B. Goodalle (Month) (Day) (Year) (Hour) Alan David Brooks 350 Third St. Fairport N.Y.
 Official 316 West Ave. Hilton N.Y. Profession Deputyman Witness Wayne Lawrence Brooks 29 Perin St. Fairport N.Y.
 Period for solemnization of marriage begins at 12:20 P.M. on the 25 day of November 1957 and ends the 23 day of January 1958

RECORD OF MARRIAGES

Reported 1-2-1958
mailed to State Dept of Health 1-6-1958
Reported 1-2-1958
mailed to State Dept of Health 1-6-1958
Reported 1-2-1958
mailed to State Dept of Health 1-6-1958
Reported 1-2-1958
mailed to State Dept of Health 1-6-1958

City Perinton County Morgan STATE OF NEW YORK No. 58
 Clerk Ruth M. Baulby

GROOM		BRIDE	
Name <u>Kenneth Wayne Dravin</u>	Color <u>White</u>	Name <u>Suzanne Marie Parolke</u>	Color <u>White</u>
Residence <u>57 Somerset St. Fairport N.Y.</u>	Age <u>21, Nov 18, 1936</u>	Residence <u>1430 1/2 Main St. Fairport N.Y.</u>	Age <u>18, May 3-1939</u>
Occupation <u>Salesman - Barton Bros.</u>	No. of marriage <u>1st</u>	Occupation <u>Charist Kodak</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Cowego N.Y.</u>	Former husband or husbands living or dead
Father <u>Kenneth Henry Dravin</u>	Divorced	Father <u>Arthur Sudeik Parolke</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Silvia Dravin</u>	" where	Mother <u>S. Anita Bayley</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Morgan County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 12-3-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Morgan County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date 12-3-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai Fairport N.Y. Date 11-26-57</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>John Kraai Fairport N.Y. Date 11-26-57</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth record</u> (Form)		Proof of age <u>Birth record</u> (Form)	
Date: Affidavit <u>Dec 7, 1957</u> License <u>Dec 7, 1957 9:34 A</u> Marriage <u>Dec 14, 1957 2:30 P.M.</u> Place of Marriage <u>Cowego N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Dec 7, 1957</u> License <u>Dec 7, 1957 9:34 A</u> Marriage <u>Dec 14, 1957 2:30 P.M.</u> Place of Marriage <u>Cowego N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>John A. N. Kirsch</u> Profession <u>Minister</u> Witness <u>Kenneth S. Bowler - 7 Panama St. Orleans N.Y.</u>		Official <u>John A. N. Kirsch</u> Profession <u>Minister</u> Witness <u>Kenneth S. Bowler - 7 Panama St. Orleans N.Y.</u>	
Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>8</u> day of <u>December</u> 19 <u>57</u> and ends the <u>6</u> day of <u>February</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>9:34 A.M.</u> on the <u>8</u> day of <u>December</u> 19 <u>57</u> and ends the <u>6</u> day of <u>February</u> 19 <u>58</u>	

City Perinton County Morgan STATE OF NEW YORK No. 59
 Clerk Ruth M. Baulby

GROOM		BRIDE	
Name <u>Adriano Di Bonaventura</u>	Color <u>White</u>	Name <u>Lena De Cocco</u>	Color <u>White</u>
Residence <u>209 Magnolia St. East Rochester N.Y.</u>	Age <u>21 - Jan 3, 1936</u>	Residence <u>209 Magnolia St. East Rochester N.Y.</u>	Age <u>20 - Mar 1, 1937</u>
Occupation <u>Taylor Shop - Hickay Freeman Co.</u>	No. of marriage <u>1st</u>	Occupation <u>Taylor Shop - Hickay Freeman Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Italy</u>	Former wife or wives living or dead	Birthplace <u>Italy</u>	Former husband or husbands living or dead
Father <u>Mariano Di Bonaventura</u>	Divorced	Father <u>Francesca De Cocco</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Ida Martelli</u>	" where	Mother <u>Giuvina Garzarella</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>Italy</u>	" against whom
Laboratory Statement <u>Morgan County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date Nov 26, 1957</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Morgan County Laboratories 435 E. Henrietta Rd. Rochester N.Y. Date Nov 26, 1957</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>Edwin Kriedemann Pittsford N.Y. Date Nov 25, 1957</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>Edwin Kriedemann Pittsford N.Y. Date Nov 25, 1957</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth record</u> (Form)		Proof of age <u>Birth record</u> (Form)	
Date: Affidavit <u>Dec 7, 1957</u> License <u>Dec 7, 1957 10:13 A.M.</u> Marriage <u>Dec 21, 1957 - 10:00 A.M.</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Dec 7, 1957</u> License <u>Dec 7, 1957 10:13 A.M.</u> Marriage <u>Dec 21, 1957 - 10:00 A.M.</u> Place of Marriage <u>East Rochester N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Joseph P. Brennan</u> Profession <u>Roman Catholic Priest</u> Witness <u>Anna Cavatani - 348 N. Washington St. East Roch. N.Y.</u>		Official <u>Joseph P. Brennan</u> Profession <u>Roman Catholic Priest</u> Witness <u>Anna Cavatani - 348 N. Washington St. East Roch. N.Y.</u>	
Period for solemnization of marriage begins at <u>10:13 A.M.</u> on the <u>8</u> day of <u>December</u> 19 <u>57</u> and ends the <u>6</u> day of <u>February</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>10:13 A.M.</u> on the <u>8</u> day of <u>December</u> 19 <u>57</u> and ends the <u>6</u> day of <u>February</u> 19 <u>58</u>	

City Perinton County Morgan STATE OF NEW YORK No. 60
 Clerk Ruth M. Baulby

GROOM		BRIDE	
Name <u>James Frank Richards</u>	Color <u>White</u>	Name <u>Sculah Mack Stutzman</u>	Color <u>White</u>
Residence <u>209 2nd Ave. Wayland N.Y.</u>	Age <u>64, Sept 10, 1893</u>	Residence <u>10 Clifford St. Fairport N.Y.</u>	Age <u>60, Jan 29, 1897</u>
Occupation <u>Suppl. Steam Steam Trk Corp.</u>	No. of marriage <u>2nd</u>	Occupation <u>at home</u>	No. of marriage <u>2nd</u>
Birthplace <u>Sabanon Pa.</u>	Former wife or wives living or dead <u>dead</u>	Birthplace <u>Springwater N.Y.</u>	Former husband or husbands living or dead <u>dead</u>
Father <u>George S. Richards</u>	Divorced	Father <u>Erwin A. Mack</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Jennie Birked</u>	" where	Mother <u>Gettie Brockway</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Morgan County Laboratories Corning N.Y. Date 11-14-57</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>Morgan County Laboratories 132 E. Henrietta Rd. Rochester, N.Y. Date 12-6-57</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>N.W. Krich, Wayland N.Y. Date 11-13-57</u>	(Name and address of physician) (Specimens taken)	Physician's Statement <u>G. N. McEwen - 203 Main St. Fairport N.Y. Date 12-3-57</u>	(Name and address of physician) (Specimens taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Dec 7, 1957</u> License <u>Dec 7, 1957 11:14 A</u> Marriage <u>Dec 19, 1957 - 7 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Dec 7, 1957</u> License <u>Dec 7, 1957 11:14 A</u> Marriage <u>Dec 19, 1957 - 7 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>George M. Davis</u> Profession <u>clergyman</u> Witness <u>Helen G. Stutzman - 14 Balucha St. Fairport N.Y.</u>		Official <u>G. N. McEwen</u> Profession <u>clergyman</u> Witness <u>Sculah Mack Stutzman - 14 Balucha St. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>11:23 A.M.</u> on the <u>8</u> day of <u>December</u> 19 <u>57</u> and ends the <u>6</u> day of <u>February</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>11:23 A.M.</u> on the <u>8</u> day of <u>December</u> 19 <u>57</u> and ends the <u>6</u> day of <u>February</u> 19 <u>58</u>	

RECORD OF MARRIAGES

Submitted 1-2-58
State Com. of Health

mailed to State Dept of Health
1-6-1958

mailed to State Dept of Health
1-6-1958

Submitted 1-2-58
State Com. of Health

City Saint County Monroe STATE OF NEW YORK No. 61

Clerk Elizabeth H. Breaux

GROOM

BRIDE

Name Russell Martin Tabe Color White
 Residence 511 Virginia St. Rochester N.Y. Age 21, July 11, 1936
 Occupation U.S. Navy No. of marriage 1st
 Birthplace Saint N.Y. Former wife or wives living or dead.
 Father John Maynard Tabe Divorced
 Birthplace U.S. " when
 Mother Rosa Lucille Martin " where
 Birthplace U.S. " against whom
 Laboratory Statement 7th U.S. Naval Hospital, Chelsea 50, Mass. Date 12-12-57
 Physician's Statement Dr. J. S. Swenson, LT/MC, U.S.N. Date 12-9-57
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Name Margerie Ann Wisel Color White
 Residence 132 Charlotte St. Rochester N.Y. Age 19, April 21, 1938
 Telephone Rochester N.Y. Telephone Co. No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead.
 Father John Herman Wisel Divorced
 Birthplace U.S. " when
 Mother Renta Eugenie McHanna " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau Lab., Rochester 20, N.Y. Date 12-11-57
 Physician's Statement Dr. Ernest B. Melick, 457 Park Ave. Rochester N.Y. Date 12-9-57
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date Affidavit Dec. 15-1957 License Dec. 15-1957 Marriage Dec. 28-1957 11:30 A.M. Place of Marriage Rochester N.Y.
 Official Robert H. Roberts - 7 Church Ave. Newburgh N.Y. Profession Catholic Priest Witness Eythia A. Morris - 211 E. 2nd St. Saint N.Y.
 Period for solemnization of marriage begins at 5:20 P.M. on the 16 day of December 1957 and ends the 14 day of February 1958

City Saint County Monroe STATE OF NEW YORK No. 62

Clerk Elizabeth H. Breaux

GROOM

BRIDE

Name Richard Walter King Color White
 Residence 5 Suffolk St. Saint N.Y. Age 22, Jan 14, 1935
 Occupation Welder, New York Central No. of marriage 1st
 Birthplace Brighton N.Y. Former wife or wives living or dead.
 Father Carlton Heron King Divorced
 Birthplace U.S. " when
 Mother Grace Malcom " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 S. Henrietta St. Rochester N.Y. Date 12-17-57
 Physician's Statement George A. Dean, Saint N.Y. Date 12-13-57
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Name Elizabeth Basile Color White
 Residence 121 High St. Saint N.Y. Age 19, Aug. 8, 1938
 Occupation Gantry Worker, Stromberg-Cadman No. of marriage 1st
 Birthplace Saint N.Y. Former husband or husbands living or dead.
 Father Joseph Basile Divorced
 Birthplace U.S. " when
 Mother Louise Eleanor Pittman " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 S. Henrietta St. Rochester N.Y. Date 12-17-57
 Physician's Statement George A. Dean, Saint N.Y. Date 12-12-57
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date Affidavit Dec. 17-1957 License Dec. 17-1957 Marriage Dec. 21-1957 10:00 A.M. Place of Marriage Saint N.Y.
 Official Richard A. Hart Profession Priest Witness Mark M. Dean - 17 Durant St. Saint N.Y.
 Period for solemnization of marriage begins at 6:45 P.M. on the 18 day of December 1957 and ends the 16 day of February 1958

City Saint County Monroe STATE OF NEW YORK No. 63

Clerk Elizabeth H. Breaux

GROOM

BRIDE

Name Warren Russell Malone Color White
 Residence 23 Railroad St. Saint N.Y. Age 20, March 31, 1937
 Occupation Printer, Printing Co. No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead.
 Father Kenneth Alfred Malone Divorced
 Birthplace U.S. " when
 Mother Alice Evelyn Hegeman " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau Laboratories, Rochester N.Y. Date 12-6-57
 Physician's Statement Joseph Mark, 4084 Dewey Ave. Rochester 16, N.Y. Date 12-3-57
 Examination requirements Were not dispensed with by judge or justice
 Consent by Mrs. Alice E. Malone Relation Mother Date 12-21-57
 Consent by _____ Relation _____ Date _____
 Proof of age Certification of Birth (Form)

Name Phonema Ruth LeBaron Color White
 Residence 27 Brighton St. Rochester N.Y. Age 19, Feb. 18, 1938
 Occupation Gantry Worker, Illness Co. No. of marriage 1st
 Birthplace Syona N.Y. Former husband or husbands living or dead.
 Father Nelson Edward LeBaron Divorced
 Birthplace U.S. " when
 Mother Betta May Miller " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Bureau Laboratories, Rochester N.Y. Date 12-6-57
 Physician's Statement Joseph Mark, 4084 Dewey Ave. Rochester 16, N.Y. Date 12-3-57
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Birth record (Form)

Date Affidavit Dec. 21-1957 License Dec. 21-1957 Marriage Dec. 28-1957 1:00 P.M. Place of Marriage Syona N.Y.
 Official Robert H. Roberts Profession Clergyman Witness Mrs. Louise T. Dunton - 142 Dewey Ave. Rochester N.Y.
 Period for solemnization of marriage begins at 11:58 A.M. on the 22 day of December 1957 and ends the 20 day of February 1958

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 64
Clerk Elizabeth H. Quince

Form for William Deter Paine and Edith Foster. Includes fields for Name, Residence, Occupation, Birthplace, Father, Mother, Laboratory Statement, Physician's Statement, Examination requirements, Consent by, and Proof of age.

Date: Affidavit Dec 23-1957 License Dec 23-1957 16:45 Marriage Dec 28-1957 2:30 P.M. Place of Marriage Gaigait N.Y.
Official: Clifford St. Gaigait N.Y. Profession: Minister Witness: Henry W. Kidder - New London, N.H.

Period for solemnization of marriage begins at 10:45 A.M. on the 24 day of December 1957 and ends the 22 day of January 1958
City Perinton County Monroe STATE OF NEW YORK No. 1
Clerk Elizabeth H. Quince

Form for David John Lemon and Joan Nancy Nielsen. Includes fields for Name, Residence, Occupation, Birthplace, Father, Mother, Laboratory Statement, Physician's Statement, Examination requirements, Consent by, and Proof of age.

Date: Affidavit Jan 2-1958 License Jan 2-1958 3:04 P.M. Marriage Jan 4-1958 10:30 A.M. Place of Marriage East Rochester N.Y.
Official: Clifford St. Gaigait N.Y. Profession: Justice of Peace Witness: Mrs. George H. Hais - 347 Cedar St. Rochester N.Y.

Period for solemnization of marriage begins at 3:04 P.M. on the 3 day of January 1958 and ends the 1 day of March 1958
City Perinton County Monroe STATE OF NEW YORK No. 2
Clerk Elizabeth H. Quince

Form for Clarence Day Watson and Barbara Benham Fox. Includes fields for Name, Residence, Occupation, Birthplace, Father, Mother, Laboratory Statement, Physician's Statement, Examination requirements, Consent by, and Proof of age.

Date: Affidavit Jan 16-1958 License Jan 16-58 9:20 P.M. Marriage Jan 18-1958 5:00 P.M. Place of Marriage Gaigait N.Y.
Official: Maurice Eugene Fox Profession: Clergyman Witness: Fred Fox - 775 1/2 Bedford St. Gaigait N.Y.

Reported State Com Health 1-2-1958
mailed to State Dept of Health 1-6-1958
Reported State Health Com 2-3-58
mailed to State Dept of Health 2-5-58
Reported State Com Health 2-3-58
mailed to State Dept of Health 2-5-58

RECORD OF MARRIAGES

Reported State Com
Health Dept 2-3-58

Mailed to State Dept of
Health 2/15/58

Reported State Com
Health Dept 2-3-58

Reported State Com
Health Dept 3-5-58

City Perinton County Monroe STATE OF NEW YORK No. 3
Clerk Elizabeth H. Pierce

GROOM

Name Peter Carmen Barbano Color White
 Residence 215 East Hickory St. Rochester N.Y. Age 20 Aug. 15 1937
 Occupation Factory Work - Stromberg No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father Peter Sam Barbano Divorced
 Birthplace Italy " when
 Mother Mary Bonaldi " where
 Birthplace Italy " against whom
 Laboratory Statement Rochester Health Bureau Date 1-13-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement Charles A. Hays Date 1-10-58
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by Peter Barbano Relation Father Date 1-17-58
 Consent by Mary Barbano Relation Mother Date 1-17-58
 Proof of age Automobile Driver's License (Form)

BRIDE

Name Sandra Jean Holloway Color White
 Residence 108 West Gilbert St. East Rochester N.Y. Age 18 Sept. 28 1937
 Occupation Clerical Work - Credit Bureau No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father Charles Henry Holloway Divorced
 Birthplace U.S. " when
 Mother Helen Esther Brown " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date 12-31-57
 (Name and address of laboratory) (Test completed)
 Physician's Statement John Kraci, Fairport N.Y. Date 12-22-57
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Relation _____ Date _____
 Relation _____ Date _____
 Date _____
 (Judge, Children's Court)
 Proof of age Birth record (Form)

Date: Affidavit Jan 17 1958 License Jan 17 1958 4:30 P.M. Marriage Jan 18 1958 11:00 A.M. Place of Marriage East Rochester N.Y.
 Official 207 S. Main St. East Rochester N.Y. Profession Catholic Priest Witness Philip A. Sotino, East Rochester N.Y.
 Period for solemnization of marriage begins at 10:44 A.M. on the 18 day of January 1958 and ends the 16 day of March 1958

City Perinton County Monroe STATE OF NEW YORK No. 4
Clerk Elizabeth H. Pierce

GROOM

Name Elden James Renaud Color White
 Residence 178 Orleans St. Rochester N.Y. Age 22 April 11 1925
 Occupation Industrial Equip. Salesman No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father John Henri Renaud Divorced
 Birthplace U.S. " when
 Mother Gertrude Weisinger " where
 Birthplace U.S. " against whom
 Laboratory Statement Rochester Health Lab. Date 12-31-57
 (Name and address of laboratory) (Test completed)
 Physician's Statement Charles S. Moran, M.D. Date 12-26-57
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Ellen Amelia Barones Color White
 Residence 234 E. Gilbert St. East Rochester N.Y. Age 23 Feb. 13 1934
 Occupation High School Teacher No. of marriage 1st
 Birthplace North Brookfield N.Y. Former husband or husbands living or dead
 Father Louis Joseph Barones Divorced
 Birthplace Lithuania " when
 Mother Amelia Karpus " where
 Birthplace Lithuania " against whom
 Laboratory Statement Rochester Health Bureau Lab. Date 12-31-57
 (Name and address of laboratory) (Test completed)
 Physician's Statement Charles S. Moran, M.D. Date 12-26-57
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Relation _____ Date _____
 Relation _____ Date _____
 Date _____
 (Judge, Children's Court)
 Proof of age _____ (Form)

Date: Affidavit Jan 20 1958 License Jan 20 1958 4:30 P.M. Marriage Jan 22 1958 11 A.M. Place of Marriage East Rochester N.Y.
 Official 207 S. Main St. East Rochester N.Y. Profession Catholic Priest Witness William A. Pears, 161 Sayon St. Rochester N.Y.
 Period for solemnization of marriage begins at 4:12 P.M. on the 21 day of January 1958 and ends the 19 day of March 1958

City Perinton County Monroe STATE OF NEW YORK No. 5
Clerk Elizabeth H. Pierce

GROOM

Name Lawrence Hull Color white
 Residence 16 Bayview Rd., Fairport N.Y. Age 23 Dec 20 1934
 Occupation Electrician - Filter Co. No. of marriage 1st
 Birthplace Perinton, N.Y. Former wife or wives living or dead
 Father Harvey Hull Divorced
 Birthplace U.S. " when
 Mother Viola Verne Bedano " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date 1-31-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement Dr. George A. Bedano Date 1-27-58
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Birth record (Form)

BRIDE

Name Evelyn Myrtle Hoyt Color white
 Residence 177 Crescent Road, Fairport N.Y. Age 20 Dec 26 1937
 Occupation Reservationist - Airline No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father Martin Brock Hoyt Divorced
 Birthplace U.S. " when
 Mother Evelyn Louise Moore " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Laboratories Date 1-31-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement Dr. George A. Bedano Date 1-27-58
 (Name and address of physician) (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Relation _____ Date _____
 Relation _____ Date _____
 Date _____
 (Judge, Children's Court)
 Proof of age Birth record (Form)

Date: Affidavit Feb 4 1958 License Feb 4 1958 3:30 P.M. Marriage Feb 7 1958 9:30 P.M. Place of Marriage Fairport New York
 Official 38 E. Church St. Fairport N.Y. Profession Clergyman Witness Carol Hull, 107 Bell St. East Rochester N.Y.
 Period for solemnization of marriage begins at 3:30 P.M. on the 5th day of Feb. 1958 and ends the 3rd day of April 1958

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 6
 Clerk E. Liphbeth H. Pierce

GROOM		BRIDE	
Name <u>James Allison Cameron 3rd</u>	Color <u>white</u>	Name <u>Marian Jean Stukas</u>	Color <u>white</u>
Residence <u>21 Jefferson Circle, Pittsford N.Y.</u>	Age <u>25 - July 7, 1932</u>	Residence <u>203 Bluff Dr, East Rochester N.Y.</u>	Age <u>19 - Feb 12, 1938</u>
Occupation <u>Salesman - Fuel Oil</u>	No. of marriage <u>1st</u>	Occupation <u>Receptionist, Packaging firm</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Erie, Penn.</u>	Former husband or husbands living or dead
Father <u>James Allison Cameron</u>	Divorced	Father <u>Joseph Michael Stukas</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Therese Alice Laube</u>	" where	Mother <u>Helma Ruth Mc Intyre</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories, 200 City Hall, Buffalo, N.Y.</u> Date <u>1-16-58</u>	Date <u>1-16-58</u>	Laboratory Statement <u>Rochester Health Bureau Lab., Univ. of Rochester, Rochester, N.Y.</u> Date <u>1-31-58</u>	Date <u>1-31-58</u>
Physician's Statement <u>Myron Robinson M.D. Buffalo, N.Y.</u> Date <u>1-15-58</u>	Date <u>1-15-58</u>	Physician's Statement <u>Clay Lovel M.D., 207 Alexander St. Rochester, N.Y.</u> Date <u>1-27-58</u>	Date <u>1-27-58</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age <u>birth record</u> (Form)	
Date: Affidavit <u>Feb 7 1958</u> License <u>Feb 7 1958 12:20 P.M.</u> Marriage <u>Feb 15 1958 5:20 P.M.</u> Place of Marriage <u>Rochester, N.Y.</u>		Date: Affidavit <u>Feb 7 1958</u> License <u>Feb 7 1958 12:20 P.M.</u> Marriage <u>Feb 15 1958 5:20 P.M.</u> Place of Marriage <u>Rochester, N.Y.</u>	
Official <u>W. Main St. East Rochester, N.Y.</u> Profession <u>Chapman</u>		Official <u>James A. Cameron, Pittsford, N.Y.</u> Profession <u>Witness</u>	
Period for solemnization of marriage begins at <u>2:20 P.M.</u> on the <u>8th</u> day of <u>Feb.</u> 1958 and ends the <u>6th</u> day of <u>April</u> 1958		Period for solemnization of marriage begins at <u>2:20 P.M.</u> on the <u>8th</u> day of <u>Feb.</u> 1958 and ends the <u>6th</u> day of <u>April</u> 1958	

mailed to State Dept of Health 3-3-58

mailed to State Dept of Health 3-5-58

City Perinton County Monroe STATE OF NEW YORK No. 7
 Clerk Ruth M. Bowley, Deputy

GROOM		BRIDE	
Name <u>William Frank Ford</u>	Color <u>white</u>	Name <u>Marie Catherine Williams</u>	Color <u>white</u>
Residence <u>293 Fair Oaks Ave, Brighton N.Y.</u>	Age <u>21 - June 18, 1936</u>	Residence <u>119 Pine St, East Rochester N.Y.</u>	Age <u>17 -</u>
Occupation <u>Mechanic - Qualitrol</u>	No. of marriage <u>1st</u>	Occupation <u>Blue Print Operator - Qualitrol</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Clean, N.Y.</u>	Former husband or husbands living or dead
Father <u>Leon Lewis Ford</u>	Divorced	Father <u>Harry Rubin Williams</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Mary Tobin</u>	" where	Mother <u>Clara Pratt</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories, 435 E. Henrietta Rd, Rochester 20, N.Y.</u> Date <u>2-11-58</u>	Date <u>2-11-58</u>	Laboratory Statement <u>Monroe County Laboratories, 435 E. Henrietta Rd, Rochester 20, N.Y.</u> Date <u>2-11-58</u>	Date <u>2-11-58</u>
Physician's Statement <u>Dr. Hoffman, M.D. 507 Main St. Rochester, N.Y.</u> Date <u>2-8-58</u>	Date <u>2-8-58</u>	Physician's Statement <u>Dr. Hoffman, M.D. 507 Main St. East Rochester, N.Y.</u> Date <u>2-8-58</u>	Date <u>2-8-58</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by <u>Harry R. Williams</u> Relation <u>father</u> Date <u>2-13-58</u>	
Consent by _____ Relation _____ Date _____		Consent by <u>(Dead)</u> Relation <u>mother</u> Date _____	
Proof of age <u>drivers license</u> (Form)		Proof of age <u>birth record</u> (Form)	
Date: Affidavit <u>Feb 13 1958</u> License <u>Feb 13 1958 3:28 P.M.</u> Marriage <u>Feb 15 1958 11:00 A.M.</u> Place of Marriage <u>Brighton, N.Y.</u>		Date: Affidavit <u>Feb 13 1958</u> License <u>Feb 13 1958 3:28 P.M.</u> Marriage <u>Feb 15 1958 11:00 A.M.</u> Place of Marriage <u>Brighton, N.Y.</u>	
Official <u>Rev. Joseph T. Maloney, 150 Danvers St. Brighton, N.Y.</u> Profession <u>Catholic Priest</u>		Official <u>Rita Ann Koeller, 293 Fair Oaks Ave, Rochester, N.Y.</u> Profession <u>Witness</u>	
Period for solemnization of marriage begins at <u>3:28 P.M.</u> on the <u>14th</u> day of <u>Feb.</u> 1958 and ends the <u>11th</u> day of <u>April</u> 1958		Period for solemnization of marriage begins at <u>3:28 P.M.</u> on the <u>14th</u> day of <u>Feb.</u> 1958 and ends the <u>11th</u> day of <u>April</u> 1958	

mailed to State Dept of Health 3-3-58

City Perinton County Monroe STATE OF NEW YORK No. 8
 Clerk E. Liphbeth H. Pierce

GROOM		BRIDE	
Name <u>Terrell Lewis Odenkirk</u>	Color <u>white</u>	Name <u>Margaret Rose Ringo</u>	Color <u>white</u>
Residence <u>43 Park St Fairport N.Y.</u>	Age <u>20 - Aug. 27, 1937</u>	Residence <u>43 Park Street, Fairport N.Y.</u>	Age <u>16 -</u>
Occupation <u>Salesman - household supplies</u>	No. of marriage <u>1st</u>	Occupation <u>Nurse's aid - Knox Sanitorium</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Lewis Alexander Odenkirk</u>	Divorced	Father <u>Angelo Ringo</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Jean Mae Greger</u>	" where	Mother <u>Rosalie Falgout</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab., Rochester 20, N.Y.</u> Date <u>2-12-58</u>	Date <u>2-12-58</u>	Laboratory Statement <u>Rochester Health Bureau Lab., Rochester 20, N.Y.</u> Date <u>2-12-58</u>	Date <u>2-12-58</u>
Physician's Statement <u>Pineus Lohie M.D., 7 Portsmouth Ter, Rochester 7, N.Y.</u> Date <u>2-10-58</u>	Date <u>2-10-58</u>	Physician's Statement <u>Pineus Lohie M.D., 7 Portsmouth Ter, Rochester 7, N.Y.</u> Date <u>2-10-58</u>	Date <u>2-10-58</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by <u>Lewis L. Odenkirk</u> Relation <u>father</u> Date <u>2-18-58</u>		Consent by <u>Angelo Ringo</u> Relation <u>father</u> Date <u>2-18-58</u>	
Consent by <u>Jean M. Odenkirk</u> Relation <u>mother</u> Date <u>2-18-58</u>		Consent by <u>Rosalie Ringo</u> Relation <u>mother</u> Date <u>2-18-58</u>	
Proof of age <u>birth record</u> (Form)		Proof of age <u>birth record</u> (Form)	
Date: Affidavit <u>Feb 17 1958</u> License <u>Feb 17 1958 6:00 P.M.</u> Marriage <u>Feb 21 1958 7 P.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>		Date: Affidavit <u>Feb 17 1958</u> License <u>Feb 17 1958 6:00 P.M.</u> Marriage <u>Feb 21 1958 7 P.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>	
Official <u>Albert R. Horn, Rochester, N.Y.</u> Profession <u>Chapman</u>		Official <u>Raymond J. Cook, 213 W. Elm St, East Rochester, N.Y.</u> Profession <u>Witness</u>	
Period for solemnization of marriage begins at <u>6:03 P.M.</u> on the <u>19th</u> day of <u>Feb.</u> 1958 and ends the <u>17th</u> day of <u>April</u> 1958		Period for solemnization of marriage begins at <u>6:03 P.M.</u> on the <u>19th</u> day of <u>Feb.</u> 1958 and ends the <u>17th</u> day of <u>April</u> 1958	

RECORD OF MARRIAGES

Supplied state com Health 3-3-58

mailed to state Dept of Health 5-5-58

mailed to state Dept of Health 4/19/58

mailed to state Dept of Health 5-5-58

City Perinton County Monroe STATE OF NEW YORK No. 9

Clerk Ruth M. Boullby

GROOM		BRIDE	
Name <u>Joseph Floyd Cannito</u>	Color <u>White</u>	Name <u>Joseph Lorraine Kien</u>	Color <u>White</u>
Residence <u>26 Durant Place Fairport N.Y.</u>	Age <u>20, Feb 25 1938</u>	Residence <u>103 S. Linden St. East Rochester N.Y.</u>	Age <u>16</u>
Occupation <u>Harbor Work - Erie Canal</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Brighton N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Fairport N.Y.</u>	Former husband or husbands living or dead.
Father <u>Barfield E. Cannito</u>	Divorced	Father <u>George John Kien</u>	Divorced
Birthplace <u>U.S.A.</u>	" when	Birthplace <u>U.S.A.</u>	" when
Mother <u>Ida Mae Duella</u>	" where	Mother <u>Margaret Luella Cook</u>	" where
Birthplace <u>U.S.A.</u>	" against whom	Birthplace <u>U.S.A.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>2-4-58</u>		Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>2-4-58</u>	
Physician's Statement <u>Erich Jacobsen 10 E. Church St. Fairport N.Y.</u> Date <u>1-30-58</u>		Physician's Statement <u>Erich Jacobsen 10 E. Church St. Fairport N.Y.</u> Date <u>1-30-58</u>	
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by <u>Barfield E. Cannito</u> Relation <u>Father</u> Date <u>2-26-58</u>		Consent by <u>George J. Kien</u> Relation <u>Father</u> Date <u>2-25-58</u>	
Consent by <u>Ida Mae Cannito</u> Relation <u>Mother</u> Date <u>2-26-58</u>		Consent by <u>Margaret L. Kien</u> Relation <u>Mother</u> Date <u>2-25-58</u>	
Proof of age <u>Automobile drivers license</u>		Proof of age <u>Original birth record</u>	
Date: Affidavit <u>Feb 28 1958</u> License <u>Feb 28 1958 4:25 P.</u> Marriage <u>April 17 1958 7:00 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>Feb 28 1958</u> License <u>Feb 28 1958 4:25 P.</u> Marriage <u>April 17 1958 7:00 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official <u>Oliver C. Foster</u> Profession <u>Ordained clergyman</u> Witness <u>Barfield E. Cannito</u>		Official <u>Oliver C. Foster</u> Profession <u>Ordained clergyman</u> Witness <u>Barfield E. Cannito</u>	
Period for solemnization of marriage begins at <u>4:25 P.M.</u> on the <u>1</u> day of <u>March</u> 19 <u>58</u> and ends the <u>29</u> day of <u>April</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>4:25 P.M.</u> on the <u>1</u> day of <u>March</u> 19 <u>58</u> and ends the <u>29</u> day of <u>April</u> 19 <u>58</u>	

City Perinton County Monroe STATE OF NEW YORK No. 10

Clerk Elizabeth H. Preece

GROOM		BRIDE	
Name <u>James Peter Tubbs</u>	Color <u>White</u>	Name <u>Lois Jean Brayer</u>	Color <u>White</u>
Residence <u>12 Woodlawn Ave. Fairport N.Y.</u>	Age <u>23, Nov 28 1934</u>	Residence <u>354 Jefferson Ave. Fairport N.Y.</u>	Age <u>19, Mar 9 1939</u>
Occupation <u>Miss Sileman Bakery</u>	No. of marriage <u>1st</u>	Occupation <u>Office Worker, Gen Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Wagon, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Michael Patrick Tubbs</u>	Divorced	Father <u>Charles George Brayer</u>	Divorced
Birthplace <u>U.S.A.</u>	" when	Birthplace <u>U.S.A.</u>	" when
Mother <u>Dorena Lema Fox</u>	" where	Mother <u>Margaret S. Shaw</u>	" where
Birthplace <u>U.S.A.</u>	" against whom	Birthplace <u>U.S.A.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>3-17-58</u>		Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>3-17-58</u>	
Physician's Statement <u>George A. Dean Fairport N.Y.</u> Date <u>3-14-58</u>		Physician's Statement <u>George A. Dean Fairport N.Y.</u> Date <u>3-14-58</u>	
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of birth</u>		Proof of age <u>Certification of birth</u>	
Date: Affidavit <u>March 15 1958</u> License <u>Mar 18 1958 7:45 P.</u> Marriage <u>March 22 1958 11:00 A.</u> Place of Marriage <u>Fairport N.Y.</u>		Date: Affidavit <u>March 15 1958</u> License <u>Mar 18 1958 7:45 P.</u> Marriage <u>March 22 1958 11:00 A.</u> Place of Marriage <u>Fairport N.Y.</u>	
Official <u>Joseph A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Michael P. Tubbs</u>		Official <u>Joseph A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Michael P. Tubbs</u>	
Period for solemnization of marriage begins at <u>7:15 P.M.</u> on the <u>19</u> day of <u>March</u> 19 <u>58</u> and ends the <u>17</u> day of <u>May</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>7:15 P.M.</u> on the <u>19</u> day of <u>March</u> 19 <u>58</u> and ends the <u>17</u> day of <u>May</u> 19 <u>58</u>	

City Perinton County Monroe STATE OF NEW YORK No. 11

Clerk Ruth M. Boullby

GROOM		BRIDE	
Name <u>Mario Nicholas Fioravanti</u>	Color <u>White</u>	Name <u>Nancy Jane Mayer</u>	Color <u>White</u>
Residence <u>601 S. Bedford St. Rochester N.Y.</u>	Age <u>20, Oct 22 1937</u>	Residence <u>306 Eaglehead St. Town of Perinton N.Y.</u>	Age <u>18, Dec 9 1939</u>
Occupation <u>Mason - for Father</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Luigi Fioravanti</u>	Divorced	Father <u>Richard Edward Mayer</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.A.</u>	" when
Mother <u>Mary Chiedo</u>	" where	Mother <u>Margerie Robinson</u>	" where
Birthplace <u>U.S.A.</u>	" against whom	Birthplace <u>U.S.A.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>3-14-58</u>		Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta St. Rochester 20, N.Y.</u> Date <u>3-14-58</u>	
Physician's Statement <u>John Kraai Fairport N.Y.</u> Date <u>3-11-58</u>		Physician's Statement <u>John Kraai Fairport N.Y.</u> Date <u>3-11-58</u>	
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by <u>Mary Fioravanti</u> Relation <u>Mother</u> Date <u>3-20-58</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Luigi Fioravanti</u> Relation <u>Father</u> Date <u>3-20-58</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth record</u>		Proof of age <u>Birth record</u>	
Date: Affidavit <u>March 20 1958</u> License <u>Mar 20 1958 1:35 P.</u> Marriage <u>April 13 1958 11:00 A.</u> Place of Marriage <u>East Rochester N.Y.</u>		Date: Affidavit <u>March 20 1958</u> License <u>Mar 20 1958 1:35 P.</u> Marriage <u>April 13 1958 11:00 A.</u> Place of Marriage <u>East Rochester N.Y.</u>	
Official <u>George Patrick Brennan</u> Profession <u>Roman Catholic Priest</u> Witness <u>Mario Fioravanti</u>		Official <u>George Patrick Brennan</u> Profession <u>Roman Catholic Priest</u> Witness <u>Mario Fioravanti</u>	
Period for solemnization of marriage begins at <u>11:38 P.M.</u> on the <u>21</u> day of <u>March</u> 19 <u>58</u> and ends the <u>19</u> day of <u>May</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>11:38 P.M.</u> on the <u>21</u> day of <u>March</u> 19 <u>58</u> and ends the <u>19</u> day of <u>May</u> 19 <u>58</u>	

RECORD OF MARRIAGES

Required State Com of Health 5-1-58
mailed to State Dept of Health 5-5-58

City Perinton County Monroe STATE OF NEW YORK No. 15
 Clerk Burt M. Bault

GROOM		BRIDE	
Name <u>Ronald Howard Moran</u> <small>(Full name)</small>	Color <u>White</u>	Name <u>Helen Edith Moffitt</u> <small>(Full name)</small>	Color <u>White</u>
Residence <u>1940 Dewey Ave. Rochester</u>	Age <u>21, Dec. 28-1936</u>	Residence <u>83 Summit St. Saugus N.Y.</u>	Age <u>21, April 19-1936</u>
Occupation <u>Textile Inspector - Eastman Kodak</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Saugusport N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Howard Frank Moran</u>	Divorced	Father <u>Osceola James Moffitt</u>	Divorced
Birthplace <u>Canada</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Velma K. Kanous</u>	" where	Mother <u>Catherine Margaret Moffitt</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>England</u>	" against whom
Laboratory Statement <u>Monroe County Substation 435 E. Henrietta Rd. Rochester N.Y. Date 3-27-58</u> <small>(Name and address of laboratory) (Test completed)</small>	Date <u>3-27-58</u>	Laboratory Statement <u>Monroe County Substation 435 E. Henrietta Rd. Rochester N.Y. Date 3-28-58</u> <small>(Name and address of laboratory) (Test completed)</small>	Date <u>3-28-58</u>
Physician's Statement <u>Dr. H. McEachern 70 S. Main St. Saugusport N.Y. Date 3-26-58</u> <small>(Name and address of physician) (Specimen taken)</small>	Date <u>3-26-58</u>	Physician's Statement <u>Dr. H. McEachern 70 S. Main St. Saugusport N.Y. Date 3-26-58</u> <small>(Name and address of physician) (Specimen taken)</small>	Date <u>3-26-58</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>		Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth record</u> <small>(Form)</small>		Proof of age <u>Baptismal record</u> <small>(Form)</small>	
Date: Affidavit <u>April 5-1958</u> License <u>April 5-1958-10:20 A</u> Marriage <u>April 12-1958-2:30 P</u> Place of Marriage <u>Saugusport N.Y.</u> <small>(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)</small>		Date: Affidavit <u>April 5-1958</u> License <u>April 5-1958-10:20 A</u> Marriage <u>April 12-1958-2:30 P</u> Place of Marriage <u>Saugusport N.Y.</u> <small>(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)</small>	
Official <u>Burt M. Bault</u> Profession <u>Clergyman</u>		Official <u>Robert W. Hunt - 1940 Dewey Ave. Rochester N.Y.</u> Witness <u>Elizabeth C. Moffitt - 83 Summit St. Saugusport N.Y.</u>	
Period for solemnization of marriage begins at <u>10:15 A.M.</u> on the <u>6</u> day of <u>April</u> 1958 and ends the <u>4</u> day of <u>June</u> 1958		Period for solemnization of marriage begins at <u>10:15 A.M.</u> on the <u>6</u> day of <u>April</u> 1958 and ends the <u>4</u> day of <u>June</u> 1958	

Required State Com of Health 5-1-58
mailed to State Dept of Health 5-5-58

City Perinton County Monroe STATE OF NEW YORK No. 16
 Clerk Elizabeth H. Swain

GROOM		BRIDE	
Name <u>Thomas Howard Seate</u> <small>(Full name)</small>	Color <u>White</u>	Name <u>Sheila Ann Connors</u> <small>(Full name)</small>	Color <u>White</u>
Residence <u>201 South Street East Rochester</u>	Age <u>20, Dec. 26-1937</u>	Residence <u>510 Summit St. East Rochester N.Y.</u>	Age <u>19, Dec. 24-1939</u>
Occupation <u>Clerk, Hershey Store</u>	No. of marriage	Occupation <u>at home</u>	No. of marriage
Birthplace <u>East Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>East Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>Dennis Seate</u>	Divorced	Father <u>Elroy Dennis Connors</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Victoria Provost</u>	" where	Mother <u>Anne Belle Wells</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Substation 435 E. Henrietta Rd. Rochester N.Y. Date 4-1-58</u> <small>(Name and address of laboratory) (Test completed)</small>	Date <u>4-1-58</u>	Laboratory Statement <u>Monroe County Substation 435 E. Henrietta Rd. Rochester N.Y. Date 4-1-58</u> <small>(Name and address of laboratory) (Test completed)</small>	Date <u>4-1-58</u>
Physician's Statement <u>Joseph J. Haber East Rochester N.Y. Date 3-31-58</u> <small>(Name and address of physician) (Specimen taken)</small>	Date <u>3-31-58</u>	Physician's Statement <u>Joseph J. Haber East Rochester N.Y. Date 3-31-58</u> <small>(Name and address of physician) (Specimen taken)</small>	Date <u>3-31-58</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>		Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>	
Consent by <u>Dennis Seate</u> Relation <u>Father</u> Date <u>4-7-58</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Victoria Seate</u> Relation <u>Mother</u> Date <u>4-7-58</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>Birth record</u> <small>(Form)</small>		Proof of age <u>Certification of Birth</u> <small>(Form)</small>	
Date: Affidavit <u>April 7-1958</u> License <u>April 7-1958-12:50 P</u> Marriage <u>April 12-1958-2:30 P</u> Place of Marriage <u>East Rochester N.Y.</u> <small>(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)</small>		Date: Affidavit <u>April 7-1958</u> License <u>April 7-1958-12:50 P</u> Marriage <u>April 12-1958-2:30 P</u> Place of Marriage <u>East Rochester N.Y.</u> <small>(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)</small>	
Official <u>W. Paul</u> Profession <u>Clergyman</u>		Official <u>Robert W. Hunt - 1940 Dewey Ave. Rochester N.Y.</u> Witness <u>Sheila Connors - 114 W. Saugus St. East Rochester N.Y.</u>	
Period for solemnization of marriage begins at <u>1:25 P.M.</u> on the <u>8</u> day of <u>April</u> 1958 and ends the <u>6</u> day of <u>June</u> 1958		Period for solemnization of marriage begins at <u>1:25 P.M.</u> on the <u>8</u> day of <u>April</u> 1958 and ends the <u>6</u> day of <u>June</u> 1958	

Required State Com of Health 5-1-58
mailed to State Dept of Health 5-5-58

City Perinton County Monroe STATE OF NEW YORK No. 17
 Clerk Elizabeth H. Swain

GROOM		BRIDE	
Name <u>Robert Fisher Ogden</u> <small>(Full name)</small>	Color <u>White</u>	Name <u>Jayne Edna Tilson</u> <small>(Full name)</small>	Color <u>White</u>
Residence <u>61 Freeman St. Rochester</u>	Age <u>44, 1-26-1914</u>	Residence <u>210 Elm St. Rochester N.Y.</u>	Age <u>28, 5-19-1929</u>
Occupation <u>Salesman, Wiggins Electric</u>	No. of marriage <u>2nd</u>	Occupation <u>Secretary, General Wiping Cloth Co</u>	No. of marriage <u>2nd</u>
Birthplace <u>Buttledge Penn</u>	Former wife or wives living or dead <u>living</u>	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead <u>living</u>
Father <u>Charles Hill Ogden</u>	Divorced <u>Yes</u>	Father <u>John Leo Mc Hatt</u>	Divorced <u>Yes</u>
Birthplace <u>U.S.</u>	" when <u>Jan. 26-1928</u>	Birthplace <u>Canada</u>	" when <u>Mar. 24-1928</u>
Mother <u>Helen Gray</u>	" where <u>Wiggins</u>	Mother <u>Edna Lindsay</u>	" where <u>Wiggins, Mexe</u>
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom <u>Samuel A. Tilson</u>
Laboratory Statement <u>Rochester Health Bureau 260 E. Exchange Blvd. Rochester N.Y. Date 4-8-58</u> <small>(Name and address of laboratory) (Test completed)</small>	Date <u>4-8-58</u>	Laboratory Statement <u>Rochester Health Bureau 260 E. Exchange Blvd. Rochester N.Y. Date 4-8-58</u> <small>(Name and address of laboratory) (Test completed)</small>	Date <u>4-8-58</u>
Physician's Statement <u>H. F. Stjohn 687 Seneca St. Rochester N.Y. Date 4-6-58</u> <small>(Name and address of physician) (Specimen taken)</small>	Date <u>4-6-58</u>	Physician's Statement <u>H. F. Stjohn 687 Seneca St. Rochester N.Y. Date 4-6-58</u> <small>(Name and address of physician) (Specimen taken)</small>	Date <u>4-6-58</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>		Examination requirements <u>Were not</u> dispensed with by judge or justice <small>(Were or were not)</small>	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ <small>(Form)</small>		Proof of age _____ <small>(Form)</small>	
Date: Affidavit <u>April 9-1958</u> License <u>April 9-1958-12:30 P</u> Marriage <u>April 11-1958-12:30 P</u> Place of Marriage <u>East Rochester N.Y.</u> <small>(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)</small>		Date: Affidavit <u>April 9-1958</u> License <u>April 9-1958-12:30 P</u> Marriage <u>April 11-1958-12:30 P</u> Place of Marriage <u>East Rochester N.Y.</u> <small>(Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour)</small>	
Official <u>Robert W. Hunt</u> Profession <u>Judge of Peace</u>		Official <u>Robert W. Hunt - 1940 Dewey Ave. Rochester N.Y.</u> Witness <u>Edna Tilson - 2092 5th St. Rochester N.Y.</u>	
Period for solemnization of marriage begins at <u>12:20 P.M.</u> on the <u>10</u> day of <u>April</u> 1958 and ends the <u>8</u> day of <u>June</u> 1958		Period for solemnization of marriage begins at <u>12:20 P.M.</u> on the <u>10</u> day of <u>April</u> 1958 and ends the <u>8</u> day of <u>June</u> 1958	

RECORD OF MARRIAGES

mailed state Dept of Health 5-5-58

City Perinton County Monroe STATE OF NEW YORK No. 21
Town Perinton Clerk Ruth M. Bouldry

GROOM		BRIDE	
Name <u>Joseph D. Agostino</u>	Color <u>White</u>	Name <u>Suey Ann Botticelli</u>	Color <u>White</u>
Residence <u>217 E Commercial St Rochester N.Y.</u>	Age <u>22, 7-31-35</u>	Residence <u>506 S Washington St East Rochester N.Y.</u>	Age <u>20, Mar 7-1938</u>
Occupation <u>Private, U.S. Army</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Mount Morris N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead.
Father <u>James Frank D'Agostino</u>	Divorced	Father <u>Frank Anthony Botticelli</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Josephine Orange</u>	" where	Mother <u>Ann Louise Michers</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Dept</u>	Date <u>4-28-58</u>	Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>4-21-58</u>
Physician's Statement <u>G.J. Hamilton Pittsford N.Y.</u>	Date <u>4-18-58</u>	Physician's Statement <u>G.J. Hamilton Pittsford N.Y.</u>	Date <u>4-18-58</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age <u>Below record</u>	(Form)
Date: Affidavit <u>April 24 1958</u>	License <u>April 24 1958 3:15 P</u>	Marriage <u>April 26 1958 9:00 A</u>	Place of Marriage <u>East Rochester N.Y.</u>
Official <u>John F. Hentzel</u>	Official <u>John F. Hentzel</u>	Witness <u>George Botticelli</u>	Witness <u>Gene Tribetti</u>
Period for solemnization of marriage begins at <u>3:45 P.M.</u> on the <u>25</u> day of <u>April</u> 1958 and ends the <u>23</u> day of <u>June</u> 1958			

mailed state Dept of Health 5-5-58

City Perinton County Monroe STATE OF NEW YORK No. 22
Town Perinton Clerk Ruth M. Bouldry

GROOM		BRIDE	
Name <u>George Cornelius Stanton</u>	Color <u>negro</u>	Name <u>Margaret Euline Breathouse</u>	Color <u>negro</u>
Residence <u>126 Tremont St Rochester N.Y.</u>	Age <u>22, June 3-1935</u>	Residence <u>178 Tremont St Rochester N.Y.</u>	Age <u>22, Feb 25-1936</u>
Occupation <u>Trench Driver, U.S. Army</u>	No. of marriage <u>1st</u>	Occupation <u>Division Help, Strongman Hospital</u>	No. of marriage <u>1st</u>
Birthplace <u>Waton Falls, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Geneville, Ala.</u>	Former husband or husbands living or dead.
Father <u>George Cornelius Stanton, Sr</u>	Divorced	Father <u>Samuel Breathouse</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Cathy Jordan</u>	" where	Mother <u>Lillian Kirk</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>4-22-58</u>	Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>4-22-58</u>
Physician's Statement <u>Chadler T. Sunfeld</u>	Date <u>4-18-58</u>	Physician's Statement <u>Chadler T. Sunfeld</u>	Date <u>4-18-58</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>Automobile driver's license</u>	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>April 25 1958</u>	License <u>April 25 1958 1:15 P</u>	Marriage <u>April 26 1958 5:00 P.M.</u>	Place of Marriage <u>Rochester N.Y.</u>
Official <u>John F. Hentzel</u>	Official <u>John F. Hentzel</u>	Witness <u>Willie Brown</u>	Witness <u>Jeannie Max Johnson</u>
Period for solemnization of marriage begins at <u>1:29 P.M.</u> on the <u>26</u> day of <u>April</u> 1958 and ends the <u>24</u> day of <u>June</u> 1958			

mailed state Dept of Health 6-2-58

City Perinton County Monroe STATE OF NEW YORK No. 23
Town Perinton Clerk Elizabeth H. Swessa

GROOM		BRIDE	
Name <u>Frankish Chalen Stupia</u>	Color <u>White</u>	Name <u>Eleana Margaret Gure</u>	Color <u>White</u>
Residence <u>34 89th St East Rochester N.Y.</u>	Age <u>21, Feb 11-1937</u>	Residence <u>419 North St Rochester N.Y.</u>	Age <u>23, Jan 7, 1935</u>
Occupation <u>Factory Work - Sewer Production</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Albaca N.Y.</u>	Former husband or husbands living or dead.
Father <u>Anthony Phillip Stupia</u>	Divorced	Father <u>Howard Gure</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Mary Biglietti</u>	" where	Mother <u>Eleana Louise Grouer</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>4-29-58</u>	Laboratory Statement <u>Rochester Health Bureau</u>	Date <u>4-29-58</u>
Physician's Statement <u>J.A. Johnson</u>	Date <u>4-28-58</u>	Physician's Statement <u>J.A. Johnson</u>	Date <u>4-28-58</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>Baptismal record</u>	(Form)	Proof of age <u>Birth record</u>	(Form)
Date: Affidavit <u>May 1 1958</u>	License <u>May 1 1958 11:48 P</u>	Marriage <u>May 2 1958 1:15 P.M.</u>	Place of Marriage <u>Rochester N.Y.</u>
Official <u>John F. Hentzel</u>	Official <u>John F. Hentzel</u>	Witness <u>Escala Mudo</u>	Witness <u>Robert Macchiat</u>
Period for solemnization of marriage begins at <u>11:48 A.M.</u> on the <u>2nd</u> day of <u>May</u> 1958 and ends the <u>30th</u> day of <u>July</u> 1958			

RECORD OF MARRIAGES

Reported to State Dept of Health 7-5-58
Reported to State Dept of Health 7-5-58
Reported to State Dept of Health 7-5-58
Reported to State Dept of Health 7-5-58
Reported to State Dept of Health 7-5-58

City Perinton County Monroe STATE OF NEW YORK No. 24
 Town Perinton Clerk Ruth M. Beatty

GROOM		BRIDE	
Name <u>Carl Eno Slade</u>	Color <u>White</u>	Name <u>Millicent Alice Walker</u>	Color <u>White</u>
Residence <u>Union St. Macedon N.Y.</u>	Age <u>43, May 29-1914</u>	Residence <u>610 Roosevelt St. East Rochester N.Y.</u>	Age <u>28, Sept 13-1929</u>
Occupation <u>Own Farm Farming</u>	No. of marriage <u>2nd</u>	Occupation <u>At Home</u>	No. of marriage <u>2nd</u>
Former wife or wives living or dead <u>dead</u>		Former husband or husbands living or dead <u>living</u>	
Father <u>S.S. Slade</u>	Divorced	Father <u>W.C. Walker</u>	Divorced <u>Yes</u>
Birthplace <u>N.S.A.</u>	" when	Birthplace <u>U.S.A.</u>	" when <u>May 25-1954</u>
Mother <u>Mary E. Stahl</u>	" where	Mother <u>Mildred Sarah Waynad</u>	" where <u>Rochester N.Y.</u>
Birthplace <u>U.S.A.</u>	" against whom	Birthplace <u>U.S.A.</u>	" against whom <u>Edward Walker</u>
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 5-2-58</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester N.Y. Date 5-2-58</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>20 West Church St. Fairport N.Y. Date 4-28-58</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>20 West Church St. Fairport N.Y. Date 4-28-58</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>May 27-1958</u> License <u>5-27-1958, 3:00 P.M.</u> Marriage <u>May 28-1958, 1:45 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>May 27-1958</u> License <u>5-27-1958, 3:00 P.M.</u> Marriage <u>May 28-1958, 1:45 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Eldon P. Kuehnert</u> Profession <u>Minister of the Word</u> Witness <u>Margaret A. Gubler - 41 Hilltop St. Fairport N.Y.</u>		Official <u>Eldon P. Kuehnert</u> Profession <u>Minister of the Word</u> Witness <u>Margaret A. Gubler - 41 Hilltop St. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>3:00 P.M.</u> on the <u>28</u> day of <u>May</u> 19 <u>58</u> and ends the <u>26</u> day of <u>July</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>3:00 P.M.</u> on the <u>28</u> day of <u>May</u> 19 <u>58</u> and ends the <u>26</u> day of <u>July</u> 19 <u>58</u>	

City Perinton County Monroe STATE OF NEW YORK No. 25
 Town Perinton Clerk Ruth M. Beatty

GROOM		BRIDE	
Name <u>Leon Carl Hare</u>	Color <u>White</u>	Name <u>Blenda Joyce Shelhamer</u>	Color <u>White</u>
Residence <u>623 W. Williams St. Fairport N.Y.</u>	Age <u>25, Nov 27-1932</u>	Residence <u>88 Bond St. Fairport N.Y.</u>	Age <u>18</u>
Occupation <u>Call Collectors</u>	No. of marriage <u>1st</u>	Occupation <u>Hair Dresser, E.W. Edwards & Son</u>	No. of marriage <u>1st</u>
Former wife or wives living or dead		Former husband or husbands living or dead	
Father <u>Leon Carl Hare, Sr.</u>	Divorced	Father <u>Walter Otwood Shelhamer</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Edith Mildred Pratt</u>	" where	Mother <u>Eva May Deakie</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 5-29-58</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 5-29-58</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai Fairport N.Y. Date 5-27-58</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraai Fairport N.Y. Date 5-27-58</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age <u>Certification of Birth</u> (Form)		Proof of age <u>Certification of Birth</u> (Form)	
Date: Affidavit <u>June 2-1958</u> License <u>6-2-1958, 3:49 P.M.</u> Marriage <u>June 1-1958, 7:15 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>June 2-1958</u> License <u>6-2-1958, 3:49 P.M.</u> Marriage <u>June 1-1958, 7:15 P.M.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>John Kraai Fairport N.Y.</u> Profession <u>Clergyman</u> Witness <u>Blenda S. Shelhamer - 88 Bond St. Fairport N.Y.</u>		Official <u>John Kraai Fairport N.Y.</u> Profession <u>Clergyman</u> Witness <u>Blenda S. Shelhamer - 88 Bond St. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>3:49 P.M.</u> on the <u>2</u> day of <u>June</u> 19 <u>58</u> and ends the <u>1</u> day of <u>August</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>3:49 P.M.</u> on the <u>2</u> day of <u>June</u> 19 <u>58</u> and ends the <u>1</u> day of <u>August</u> 19 <u>58</u>	

City Perinton County Monroe STATE OF NEW YORK No. 26
 Town Perinton Clerk Elizabeth H. Curran

GROOM		BRIDE	
Name <u>Antonio Joseph Maccarone</u>	Color <u>White</u>	Name <u>Eleanora Mary Pizzanelli</u>	Color <u>White</u>
Residence <u>56 High St. Fairport N.Y.</u>	Age <u>24, Mar 3-1934</u>	Residence <u>8 Elm St. Fairport N.Y.</u>	Age <u>21, Mar 25-1937</u>
Occupation <u>Gas Station Operator</u>	No. of marriage <u>1st</u>	Occupation <u>Office Worker Manufacturing</u>	No. of marriage <u>1st</u>
Former wife or wives living or dead		Former husband or husbands living or dead	
Father <u>Paul Maccarone</u>	Divorced	Father <u>Donato Pizzanelli</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Angeline Delbrini</u>	" where	Mother <u>Minnie Zampini</u>	" where
Birthplace <u>Italy</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 5-16-58</u>	(Name and address of laboratory) (Test completed)	Laboratory Statement <u>435 E. Henrietta Rd. Rochester 20, N.Y. Date 5-16-58</u>	(Name and address of laboratory) (Test completed)
Physician's Statement <u>John Kraai Fairport N.Y. Date 5-12-58</u>	(Name and address of physician) (Specimen taken)	Physician's Statement <u>John Kraai Fairport N.Y. Date 5-12-58</u>	(Name and address of physician) (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u>	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age <u>Automobile Drivers License</u> (Form)	
Date: Affidavit <u>June 2-1958</u> License <u>6-2-1958, 4:55 P.M.</u> Marriage <u>June 7-1958, 10:00 AM.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>June 2-1958</u> License <u>6-2-1958, 4:55 P.M.</u> Marriage <u>June 7-1958, 10:00 AM.</u> Place of Marriage <u>Fairport N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Joseph A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Genevieve E. Friend - 58 Cornell St. Fairport N.Y.</u>		Official <u>Joseph A. Kelly</u> Profession <u>Catholic Priest</u> Witness <u>Genevieve E. Friend - 58 Cornell St. Fairport N.Y.</u>	
Period for solemnization of marriage begins at <u>4:55 P.M.</u> on the <u>3</u> day of <u>June</u> 19 <u>58</u> and ends the <u>1</u> day of <u>August</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>4:55 P.M.</u> on the <u>3</u> day of <u>June</u> 19 <u>58</u> and ends the <u>1</u> day of <u>August</u> 19 <u>58</u>	

RECORD OF MARRIAGES

Reported to State Dept. of Health 7-1-58
mailed state Dept of Health 7-5-58

City Perinton County Monroe STATE OF NEW YORK No. 27
Clerk Elizabeth H. Pierce

GROOM

Name Philip Arthur Sotino Color White
 Residence 212 N. Bedford St. East Rochester N.Y. Age 20, Feb 8, 1938
 Occupation Head Teller Bank No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father Abel Sotino Divorced
 Birthplace Italy " when
 Mother Sonetta Ricci " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta St. Rochester 20 N.Y. Date 5-23-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement 2091 S. Middle St. East Rochester N.Y. Date 5-20-58
 (Name and address of physician) (Specimens taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by Abel Sotino Relation father Date 6-3-58
 Consent by Sonetta Sotino Relation mother Date 6-3-58
 Proof of age Certification of birth (Form)
 Date: Affidavit June 3, 1958 License 6-3-1958 7:25 P. Marriage June 14, 1958 11:00 AM Place of Marriage East Rochester N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Judge, Children's Court)
 Official Joseph Patrick Brennan Profession Roman Catholic Priest Witness Marie Rita Krayer 236 W. Irving St. East Rochester N.Y.
 (Name and address of official) (Name and address of witness)
 Period for solemnization of marriage begins at 7:25 P.M. on the 4 day of June 1958 and ends the 2 day of August 1958

BRIDE

Name Bernadette Ann Krayer Color White
 Residence 236 W. Irving St. East Rochester N.Y. Age 20, April 16, 1938
 Occupation Secretary Credit Bureau No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father Vincent Leo Krayer Divorced
 Birthplace U.S. " when
 Mother Blanche Marie Devlin " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta St. Rochester 20 N.Y. Date 5-23-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement 2091 S. Middle St. East Rochester N.Y. Date 5-20-58
 (Name and address of physician) (Specimens taken)
 Examination requirements Were not (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Certification of birth (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Judge, Children's Court)
 Official _____ Profession _____ Witness _____
 (Name and address of official) (Name and address of witness)
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1958 and ends the _____ day of _____ 1958

Reported to State Dept. of Health 7-1-58
mailed state Dept of Health 7-5-58

City Perinton County Monroe STATE OF NEW YORK No. 28
Clerk Ruth M. Boudry

GROOM

Name Robert Lawrence Fluzel Color White
 Residence 920 Mendota St. Rochester N.Y. Age 21, Dec 9, 1936
 Occupation Repair man Radio Telephones No. of marriage 1st
 Birthplace Rochester N.Y. Former wife or wives living or dead
 Father Henry Fluzel Divorced
 Birthplace U.S. " when
 Mother Lucy Bruma " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta St. Rochester 20 N.Y. Date 5-29-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement 2091 S. Middle St. East Rochester N.Y. Date 5-26-58
 (Name and address of physician) (Specimens taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Automatic driver license (Form)
 Date: Affidavit June 7, 1958 License June 7, 1958 11:14 A. Marriage June 14, 1958 10:00 AM Place of Marriage Fairport N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Judge, Children's Court)
 Official Donald A. Kelly Profession Catholic priest Witness Frances Huttman 2091 S. Middle St. East Rochester N.Y.
 (Name and address of official) (Name and address of witness)
 Period for solemnization of marriage begins at 11:14 A.M. on the 8 day of June 1958 and ends the 6 day of August 1958

BRIDE

Name Beverly Anne McLeod Color White
 Residence 1037 Whitney St. Fairport N.Y. Age 20, March 5, 1938
 Occupation Typist - R.M. Bancroft Co. No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father Frederick John McLeod Divorced
 Birthplace U.S. " when
 Mother Mildred Elizabeth Trenchard " where
 Birthplace U.S. " against whom
 Laboratory Statement 435 E. Henrietta St. Rochester 20 N.Y. Date 5-29-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement 2091 S. Middle St. East Rochester N.Y. Date 5-26-58
 (Name and address of physician) (Specimens taken)
 Examination requirements Were not (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Certification of birth (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Judge, Children's Court)
 Official _____ Profession _____ Witness _____
 (Name and address of official) (Name and address of witness)
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1958 and ends the _____ day of _____ 1958

Reported to State Dept. of Health 7-1-58
mailed state Dept of Health 7-5-58

City Perinton County Monroe STATE OF NEW YORK No. 29
Clerk Elizabeth H. Pierce

GROOM

Name George Joseph LaPore Color White
 Residence 467 S. Lincoln St. East Rochester N.Y. Age 49, Sept 9, 1908
 Occupation Dairy Help, Dairy Company No. of marriage 2nd
 Birthplace Macedon N.Y. Former wife or wives living or dead dead
 Father Adam LaPore Divorced
 Birthplace Italy " when
 Mother Mary Scischia " where
 Birthplace Italy " against whom
 Laboratory Statement Rochester Health Bureau Lab Rochester 20 N.Y. Date 5-28-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement 418 West Ave. East Rochester N.Y. Date 5-26-58
 (Name and address of physician) (Specimens taken)
 Examination requirements Were not dispensed with by judge or justice
 (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit June 10, 1958 License June 10, 1958 12:26 P. Marriage June 14, 1958 11:58 AM Place of Marriage Fairport N.Y.
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Judge, Children's Court)
 Official Donald A. Kelly Profession Catholic priest Witness William S. Gore 48 Frank St. Fairport N.Y.
 (Name and address of official) (Name and address of witness)
 Period for solemnization of marriage begins at 12:22 P.M. on the 11 day of June 1958 and ends the 9 day of August 1958

BRIDE

Name Priscilla Alden Color White
 Residence 86 Elm St. Fairport N.Y. Age 36, May 2, 1922
 Occupation I.B.M. Tabulator - Manufacturing Co. No. of marriage 2nd
 Birthplace Boston, Mass. Former husband or husbands living or dead living
 Father Arthur Edward Alden Divorced yes
 Birthplace U.S. " when April 1, 1905
 Mother Louise Dorothy Cambra " where Monroe County N.Y.
 Birthplace U.S. " against whom William J. Zampini
 Laboratory Statement 435 E. Henrietta St. Rochester N.Y. Date 6-3-58
 (Name and address of laboratory) (Test completed)
 Physician's Statement 418 West Ave. East Rochester N.Y. Date 5-21-58
 (Name and address of physician) (Specimens taken)
 Examination requirements Were not (Were or were not)
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 (Month) (Day) (Year) (Hour) (Month) (Day) (Year) (Hour) (Judge, Children's Court)
 Official _____ Profession _____ Witness _____
 (Name and address of official) (Name and address of witness)
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1958 and ends the _____ day of _____ 1958

RECORD OF MARRIAGES

Registered state con of Health 7-1-58
mailed state Dept of Health 7-5-58
Registered state con of Health 7-1-58
mailed state Dept of Health 7-5-58
Registered state con of Health 7-1-58
mailed state Dept of Health 8-5-58

City Town Perinton County Monroe STATE OF NEW YORK No. 30
Clerk Elizabeth H. Paine

GROOM		BRIDE	
Name <u>Harold Eugene Anthony</u>	Color <u>White</u>	Name <u>Kathleen Margaret Williams</u>	Color <u>White</u>
Residence <u>239 East Ave. East Rochester N.Y.</u>	Age <u>23, July 20, 1935</u>	Residence <u>336 Tarrington St. Rochester N.Y.</u>	Age <u>19, June 3, 1939</u>
Occupation <u>Green Operator - Gen. Co.</u>	No. of marriage <u>1st</u>	Occupation <u>Tyquist - Todd Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>East Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Arthur Francis Anthony</u>	Divorced	Father <u>Stephen Francis Williams</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Pauline Weston</u>	" where	Mother <u>Irene Brax</u>	" where
Birthplace <u>England</u>	" against whom	Birthplace <u>Canada</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Lab.</u>	Date <u>6-10-58</u>	Laboratory Statement <u>Rochester Health Bureau Lab.</u>	Date <u>6-10-58</u>
Physician's Statement <u>S. Coffey</u>	Date <u>6-1-58</u>	Physician's Statement <u>F. Offenburger</u>	Date <u>6-6-58</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by	Relation Date	Consent by	Relation Date
Consent by	Relation Date	Consent by	Relation Date
Proof of age <u>Birth record</u>	(Form)	Proof of age <u>Certification of Birth</u>	(Form)
Date: Affidavit <u>June 17, 1958</u> License <u>June 17, 1958 2:51 P.M.</u> Marriage <u>June 28, 1958 11:00 A.M.</u> Place of Marriage <u>St. Agnes</u>			
Official <u>Francis M. Ferguson</u> Profession <u>Catholic Priest</u> Witness <u>Habit W. Arnold - 341 Spencer St. Rochester N.Y.</u>			
Period for solemnization of marriage begins at <u>2:51 P.M.</u> on the <u>18</u> day of <u>June</u> 1958 and ends the <u>16</u> day of <u>August</u> 1958			

City Town Perinton County Monroe STATE OF NEW YORK No. 31
Clerk Elizabeth H. Paine

GROOM		BRIDE	
Name <u>David Albert Johnson</u>	Color <u>White</u>	Name <u>Judith Arlene Hembach</u>	Color <u>White</u>
Residence <u>Hook Road, Macedon N.Y.</u>	Age <u>21, Sept. 16, 1936</u>	Residence <u>317 High St. East Fairport N.Y.</u>	Age <u>18, Oct. 24, 1939</u>
Occupation <u>Can Company - Sales</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary - School</u>	No. of marriage <u>1st</u>
Birthplace <u>Champlain N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Fairport N.Y.</u>	Former husband or husbands living or dead
Father <u>Joseph Fidelio Johnson</u>	Divorced	Father <u>George William Hembach</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Rose Emma Zandy</u>	" where	Mother <u>Elis Auguste Hamman</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>435 East Henrietta St. Rochester N.Y.</u>	Date <u>6-13-58</u>	Laboratory Statement <u>435 East Henrietta St. Rochester N.Y.</u>	Date <u>6-13-58</u>
Physician's Statement <u>John Kraai Fairport N.Y.</u>	Date <u>6-9-58</u>	Physician's Statement <u>John Kraai Fairport N.Y.</u>	Date <u>6-9-58</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by	Relation Date	Consent by	Relation Date
Consent by	Relation Date	Consent by	Relation Date
Proof of age <u>Baptismal record</u>	(Form)	Proof of age <u>Baptismal record</u>	(Form)
Date: Affidavit <u>June 23, 1958</u> License <u>June 23, 1958 4:47 P.M.</u> Marriage <u>June 28, 1958 11:00 A.M.</u> Place of Marriage <u>Macedon N.Y.</u>			
Official <u>Raymond C. Hanna</u> Profession <u>Roman Catholic Priest</u> Witness <u>Patricia Hembach - 317 High St. East Fairport N.Y.</u>			
Period for solemnization of marriage begins at <u>4:47 P.M.</u> on the <u>24</u> day of <u>June</u> 1958 and ends the <u>22</u> day of <u>August</u> 1958			

City Town Perinton County Monroe STATE OF NEW YORK No. 32
Clerk Elizabeth H. Paine

GROOM		BRIDE	
Name <u>Edward John Frohm, Jr.</u>	Color <u>White</u>	Name <u>Mary Ann Catherine Schlitze</u>	Color <u>White</u>
Residence <u>3856 Atlantic Ave. Fairport N.Y.</u>	Age <u>27, Sept. 23, 1930</u>	Residence <u>35 Balfour St. Rochester N.Y.</u>	Age <u>24, June 8, 1934</u>
Occupation <u>Engineer - at Clear - U.S.</u>	No. of marriage <u>1st</u>	Occupation <u>At Home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester N.Y.</u>	Former husband or husbands living or dead
Father <u>Edward John Frohm, Sr.</u>	Divorced	Father <u>Joseph Edward Schlitze</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Helen Hess</u>	" where	Mother <u>Ann Marie Schmid</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Washington 25, D.C.</u>	Date <u>6-13-58</u>	Laboratory Statement <u>University of Rochester N.Y.</u>	Date <u>6-11-58</u>
Physician's Statement <u>Washing 25, D.C.</u>	Date <u>6-9-58</u>	Physician's Statement <u>196 St. Paul St. Rochester N.Y.</u>	Date <u>6-9-58</u>
Examination requirements <u>Were not</u>	dispensed with by judge or justice	Examination requirements <u>Were not</u>	dispensed with by judge or justice
Consent by	Relation Date	Consent by	Relation Date
Consent by	Relation Date	Consent by	Relation Date
Proof of age	(Form)	Proof of age	(Form)
Date: Affidavit <u>June 27, 1958</u> License <u>June 27, 1958 8:15 P.M.</u> Marriage <u>July 5, 1958 11:00 A.M.</u> Place of Marriage <u>Rochester N.Y.</u>			
Official <u>Edward P. Stanbich</u> Profession <u>Clergyman</u> Witness <u>Charles Richard Reple - 105 S. 2nd St. Clear N.Y.</u>			
Period for solemnization of marriage begins at <u>8:13 P.M.</u> on the <u>28</u> day of <u>June</u> 1958 and ends the <u>26</u> day of <u>August</u> 1958			

RECORD OF MARRIAGES

Reported State Comm. of Health 8-1-58

Males State Dept of Health 8-5-58

City Perinton County Monroe STATE OF NEW YORK No. 33
Clerk Elizabeth H. Greene

GROOM

Name Thomas Carl Hydrick Color White
 Residence 102 Bluff Dr. East Rochester N.Y. Age 20 April 5-1938
 Occupation IBM Operator - Kodak No. of marriage 1st
 Birthplace Elmore County, Alabama Former wife or wives living or dead
 Father Edward Thomas Hydrick Divorced
 Birthplace U.S. " when
 Mother Mattha Ethel Chitwood " where
 Birthplace U.S. " against whom
 Laboratory Statement County of Monroe - County Laboratories
435 E. Henrietta Rd. Rochester N.Y. Date 7-1-58
 Physician's Statement W. Wilson G. Smith
20 West Church St. Fairport N.Y. Date 6-27-58
 Examination requirements were not dispensed with by judge or justice
 Consent by Mattha Hydrick Relation mother Date 7-5-58
 Consent by Edward Hydrick Relation father Date 7-5-58
 Proof of age Automobile driver license
 Date: Affidavit July 5-1958 License July 5-1958-10:30 A Marriage July 11-1958-7:00 P.M. Place of Marriage Fairport N.Y.
 Official Albert P. Amunzio Profession Clergyman Witness George Earl Sanders - Fairport N.Y.
 Period for solemnization of marriage begins at 10:20 A.M. on the 6th day of July 1958 and ends the 4th day of Sept 1958

BRIDE

Name Mildred Ruth Scrubbs Color White
 Residence 122 Park Ave. Fairport N.Y. Age 18
 Occupation at home No. of marriage 1st
 Birthplace Penrose, Alabama Former husband or husbands living or dead
 Father Barney Eugene Scrubbs Divorced
 Birthplace U.S. " when
 Mother Mildred Allura Johnson " where
 Birthplace U.S. " against whom
 Laboratory Statement County of Monroe - County Laboratories
435 E. Henrietta Rd. Rochester N.Y. Date 7-1-58
 Physician's Statement W. Wilson G. Smith
20 West Church St. Fairport N.Y. Date 6-27-58
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Certification of Birth
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1958 and ends the _____ day of _____ 1958

Reported State Comm. of Health 8-1-58

Males State Dept of Health 8-5-58

City Perinton County Monroe STATE OF NEW YORK No. 34
Clerk Ruth M. Donnelly

GROOM

Name Donald Ray Newcomb Color White
 Residence Yellow Mills Rd. Fairport N.Y. Age 22 May 31-1936
 Occupation Truck Driver - American Can Co. No. of marriage 1st
 Birthplace Fayetteville N.Y. Former wife or wives living or dead
 Father Clayton Carl Newcomb Divorced
 Birthplace U.S. " when
 Mother Miranda Rose " where
 Birthplace U.S. " against whom
 Laboratory Statement County of Monroe - County Laboratories
435 E. Henrietta Rd. Rochester N.Y. Date 7-11-58
 Physician's Statement W. Wilson G. Smith
20 West Church St. Fairport N.Y. Date 7-2-58
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Baptismal record
 Date: Affidavit July 14-1958 License July 14-1958-4:30 P Marriage July 19-1958-3:00 P.M. Place of Marriage Fairport N.Y.
 Official Harold P. Hewitt Profession Clergyman Witness Elma Newcomb - Fairport N.Y.
 Period for solemnization of marriage begins at 4:30 P.M. on the 15 day of July 1958 and ends the 13 day of Sept 1958

BRIDE

Name Joan Marie Moll Color White
 Residence 33 Jefferson Ave. Fairport N.Y. Age 17
 Occupation Sales Office - Crocker Arms No. of marriage 1st
 Birthplace Rochester N.Y. Former husband or husbands living or dead
 Father John Abram Moll Divorced
 Birthplace U.S. " when
 Mother Alfanetta Adelia Williamson " where
 Birthplace U.S. " against whom
 Laboratory Statement County of Monroe - County Laboratories
435 E. Henrietta Rd. Rochester N.Y. Date 7-11-58
 Physician's Statement W. Wilson G. Smith
20 West Church St. Fairport N.Y. Date 7-2-58
 Examination requirements were not dispensed with by judge or justice
 Consent by _____ Relation Mother Date 7-14-58
 Consent by _____ Relation Father Date 7-14-58
 Proof of age Birth record
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1958 and ends the _____ day of _____ 1958

Reported State Comm. of Health 9-1-58

Males State Dept of Health 9-5-58

City Perinton County Monroe STATE OF NEW YORK No. 35
Clerk Elizabeth H. Greene

GROOM

Name Merit Richard Thomas Color White
 Residence Wedrick Rd. Walworth N.Y. Age 20 Nov 8-1937
 Occupation Laborer - Tool & Die No. of marriage 1st
 Birthplace Richmond, Ind. Former wife or wives living or dead
 Father Orle Ellsworth Thomas Divorced
 Birthplace U.S. " when
 Mother Rosethy Louise Kaster " where
 Birthplace U.S. " against whom
 Laboratory Statement County of Monroe - County Laboratories
435 E. Henrietta Rd. Rochester N.Y. Date 7-29-58
 Physician's Statement John Krasi M.D.
Fairport N.Y. Date 7-24-58
 Examination requirements were not dispensed with by judge or justice
 Consent by Orle S. Thomas Relation Father Date 8-1-58
 Consent by _____ Relation _____ Date _____
 Proof of age Birth record
 Date: Affidavit Aug 4-1958 License Aug 4-1958-3:15 P. Marriage Aug 6-1958-2:15 P.M. Place of Marriage Fairport N.Y.
 Official Albert P. Amunzio Profession Clergyman Witness Frederick G. Knobel, John W. Fairport, N.Y.
 Period for solemnization of marriage begins at 3:03 P.M. on the 5th day of August 1958 and ends the 3rd day of October 1958

BRIDE

Name Anne Celia Rogers Color White
 Residence 44 Main St. Fairport, N.Y. Age 17
 Occupation at home No. of marriage 1st
 Birthplace Rochester, N.Y. Former husband or husbands living or dead
 Father Albert G. Rogers Divorced
 Birthplace U.S. " when
 Mother Alice Henrietta McMalon " where
 Birthplace U.S. " against whom
 Laboratory Statement County of Monroe - County Laboratories
435 E. Henrietta Rd. Rochester N.Y. Date 7-29-58
 Physician's Statement John Krasi M.D.
Fairport N.Y. Date 7-24-58
 Examination requirements were not dispensed with by judge or justice
 Consent by Alice Rogers Relation Mother Date 8-2-58
 Consent by Albert G. Rogers Relation Father Date 8-2-58
 Proof of age Birth record
 Date: Affidavit _____ License _____ Marriage _____ Place of Marriage _____
 Official _____ Profession _____ Witness _____
 Period for solemnization of marriage begins at _____ on the _____ day of _____ 1958 and ends the _____ day of _____ 1958

RECORD OF MARRIAGES

Reported State Comm. of Health 9-1-58

Mailed State Dept. of Health 9/5/58

Reported State Comm. of Health 9-1-58

Mailed State Dept. of Health 9/5/58

Reported State Comm. of Health 9-1-58

Mailed State Dept. of Health 9/5/58

City Town Perinton County Morouse STATE OF NEW YORK No. 36

GROOM		BRIDE	
Name <u>Thomas Anthony McCullough</u>	Color <u>White</u>	Name <u>Gertrude Jacqueline Turney</u>	Color <u>White</u>
Residence <u>750 Conner Rd, Fairport, N.Y.</u>	Age <u>21-9-20-36</u>	Residence <u>3140 Chili Ave, Rochester, N.Y.</u>	Age <u>20-5-11/38</u>
Occupation <u>Self employed - Manufacturing</u>	No. of marriage <u>1st</u>	Occupation <u>Secretary - Manufacturing</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Frederick James McCullough</u>	Divorced	Father <u>William Arthur Turney</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Canada</u>	" when
Mother <u>Margaret Mary W. O'Leary</u>	" where	Mother <u>Irene Marie Grabenstatter</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rockwell Health Bureau Laboratories, 435 E. Henrietta Rd, Rochester, N.Y.</u>	Date <u>7-25-58</u>	Laboratory Statement <u>Rockwell Health Bureau Laboratories, Rochester, N.Y.</u>	Date <u>7-25-58</u>
Physician's Statement <u>Dr. J. Cronmiller, 546 Lyell Ave, Rochester, N.Y.</u>	Date <u>7-21-58</u>	Physician's Statement <u>Dr. J. Cronmiller, 546 Lyell Ave, Rochester, N.Y.</u>	Date <u>7-21-58</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>automobile drivers license</u>	(Form)	Proof of age <u>certification of birth</u>	(Form)
Date: Affidavit <u>Aug 5, 1958</u>	License <u>Aug 5, 1958 4:52 PM</u>	Marriage <u>Aug 9, 1958 9:00 AM</u>	Place of Marriage <u>Chili, New York</u>
Official <u>Donald G. Murphy</u>	Profession <u>Justice of the Peace</u>	Witness <u>Judith Q. McCullough, 750 Conner Rd, Fairport, N.Y.</u>	Witness <u>John T. MacLeod, 51 Raisin St, Rochester, N.Y.</u>
Period for solemnization of marriage begins at <u>4:52 PM</u> on the <u>6th</u> day of <u>Aug</u> 19 <u>58</u> and ends the <u>4th</u> day of <u>Oct</u> 19 <u>58</u>			

City Town Perinton County Morouse STATE OF NEW YORK No. 37

GROOM		BRIDE	
Name <u>James Michael Nighthale</u>	Color <u>White</u>	Name <u>Beatrice Miriam Rosenhain</u>	Color <u>White</u>
Residence <u>128 W. Church St, Fairport, N.Y.</u>	Age <u>32-7-19-1926</u>	Residence <u>35-40 82 St, Jackson Heights, N.Y.</u>	Age <u>29-8-28-1928</u>
Occupation <u>Engineer - Industrial</u>	No. of marriage <u>1st</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Pennacater, Penn.</u>	Former wife or wives living or dead	Birthplace <u>Germany</u>	Former husband or husbands living or dead
Father <u>Louis Ernest Nighthale</u>	Divorced	Father <u>Erich Rosenhain</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Germany</u>	" when
Mother <u>Helen Fulton Miller</u>	" where	Mother <u>Gertrude Hammerstein</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>Germany</u>	" against whom
Laboratory Statement <u>Dept. of Health, 125 W. South St, New York 13, N.Y.</u>	Date <u>7-13-58</u>	Laboratory Statement <u>Dept. of Health, 125 W. South St, New York 13, N.Y.</u>	Date <u>7-13-58</u>
Physician's Statement <u>Dr. E. Rick Rosenhain, 33-51 84 St, Jackson Heights, N.Y.</u>	Date <u>7-13-58</u>	Physician's Statement <u>Dr. E. Rick Rosenhain, 33-51 84 St, Jackson Heights, N.Y.</u>	Date <u>7-13-58</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age _____	(Form)	Proof of age _____	(Form)
Date: Affidavit <u>Aug 7, 1958</u>	License <u>Aug 7, 1958 4:42 PM</u>	Marriage <u>Aug 30, 1958 3:30 PM</u>	Place of Marriage <u>Oliverbridge, N.Y.</u>
Official <u>Frank C. Carle</u>	Profession <u>Justice of the Peace</u>	Witness <u>Beatrice Rosenhain, Jackson Heights, N.Y.</u>	Witness <u>James E. Nighthale, Pennacater, Pa.</u>
Period for solemnization of marriage begins at <u>12:47 P.M.</u> on the <u>8th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>6th</u> day of <u>October</u> 19 <u>58</u>			

City Town Perinton County Morouse STATE OF NEW YORK No. 38

GROOM		BRIDE	
Name <u>Robert Di Berardinis</u>	Color <u>White</u>	Name <u>Barbara Ann Ransco</u>	Color <u>White</u>
Residence <u>406 W. Spruce St, East Rochester, N.Y.</u>	Age <u>21-11/19/1936</u>	Residence <u>940 Linden Ave, East Rochester, N.Y.</u>	Age <u>20-7/2/1938</u>
Occupation <u>Self employed - Gas Station</u>	No. of marriage <u>1st</u>	Occupation <u>Office Clerk - Kodak</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Simplicio Di Berardinis</u>	Divorced	Father <u>Stephen Ransco</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Grace Frances Gambino</u>	" where	Mother <u>Theresa Cieleski</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories, 435 E. Henrietta Rd, Rochester 20, N.Y.</u>	Date <u>8-1-58</u>	Laboratory Statement <u>Monroe County Laboratories, 435 E. Henrietta Rd, Rochester 20, N.Y.</u>	Date <u>8-1-58</u>
Physician's Statement <u>Dr. Leo Hoffman, 507 Main St, East Rochester, N.Y.</u>	Date <u>7-29-58</u>	Physician's Statement <u>Dr. Leo Hoffman, 507 Main St, East Rochester, N.Y.</u>	Date <u>7-29-58</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Consent by _____	Relation _____ Date _____	Consent by _____	Relation _____ Date _____
Proof of age <u>certification of birth</u>	(Form)	Proof of age <u>Baptismal record</u>	(Form)
Date: Affidavit <u>Aug 9, 1958</u>	License <u>Aug 9, 1958 9:49 AM</u>	Marriage <u>Aug 16, 1958 10:00 AM</u>	Place of Marriage <u>East Rochester, N.Y.</u>
Official <u>Ray B. Murphy</u>	Profession <u>Catholic Priest</u>	Witness <u>David G. Crandall, East Rochester, N.Y.</u>	Witness <u>Valerie Cieleski, 39 Wagon St, Rochester, N.Y.</u>
Period for solemnization of marriage begins at <u>9:49 AM</u> on the <u>10th</u> day of <u>Aug</u> 19 <u>58</u> and ends the <u>8th</u> day of <u>Oct</u> 19 <u>58</u>			

RECORD OF MARRIAGES

Reported State Comm. of Health 9-1-58

Medical State Dept. of Health 9-5-58

Reported State Comm. of Health 9-1-58

Medical State Dept. of Health 9-5-58

Reported State Comm. of Health 9-1-58

Medical State Dept. of Health 10-5-58

City Perinton County Morose STATE OF NEW YORK No. 39
Town Perinton Clerk E. Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>George Kenneth Anthony</u>	Color <u>white</u>	Name <u>Faith Louise Bush</u>	Color <u>white</u>
Residence <u>2305 Monroe Ave. Brighton, N.Y.</u>	Age <u>31</u> <u>2/25/1927</u>	Residence <u>723 Airport Rd., Perinton, N.Y.</u>	Age <u>28</u> <u>6/27/1930</u>
Occupation <u>Funeral Director</u>	No. of marriage <u>2nd</u>	Occupation <u>at home</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead <u>none</u>	Birthplace <u>Buffalo, N.Y.</u>	Former husband or husbands living or dead <u>none</u>
Father <u>Kenneth Ellis Anthony</u>	Divorced <u>annulment</u>	Father <u>Fred B. Vaughan Bush</u>	Divorced
Birthplace <u>U.S.</u>	" when <u>Nov. 24, 1953</u>	Birthplace <u>U.S.</u>	" when
Mother <u>Maud Evelyn Bush</u>	" where <u>Morose Co. N.Y.</u>	Mother <u>Edna Ruth Benschart</u>	" where
Birthplace <u>U.S.</u>	against whom <u>James E. Cook & Anthony</u>	Birthplace <u>U.S.</u>	against whom
Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>8-8-58</u>	Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>8-8-58</u>
Physician's Statement <u>Dr. J. N. McEachern</u>	Date <u>8-5-58</u>	Physician's Statement <u>Dr. J. N. McEachern</u>	Date <u>8-5-58</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug 9 1958</u> License <u>Aug 9 1958 11:00 A.M.</u> Marriage <u>Aug 14 1958 8:00 P.M.</u> Place of Marriage <u>Rochester, N.Y.</u>		Date: Affidavit <u>Aug 9 1958</u> License <u>Aug 9 1958 11:00 A.M.</u> Marriage <u>Aug 14 1958 8:00 P.M.</u> Place of Marriage <u>Rochester, N.Y.</u>	
Official <u>Robert J. Coine</u> Profession <u>Presbyterian Minister</u>		Official <u>Robert J. Coine</u> Profession <u>Presbyterian Minister</u>	
Period for solemnization of marriage begins at <u>11:58 A.M.</u> on the <u>10th</u> day of <u>Aug.</u> 19 <u>58</u> and ends the <u>8th</u> day of <u>Oct.</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>11:58 A.M.</u> on the <u>10th</u> day of <u>Aug.</u> 19 <u>58</u> and ends the <u>8th</u> day of <u>Oct.</u> 19 <u>58</u>	

City Perinton County Morose STATE OF NEW YORK No. 40
Town Perinton Clerk E. Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Alexander Anthony Di Salvo</u>	Color <u>white</u>	Name <u>Pauline Josephine Schillaci</u>	Color <u>white</u>
Residence <u>81 Union St. Birtsville, N.Y.</u>	Age <u>27</u> <u>7/4/1931</u>	Residence <u>224 W. Guy St. East Rochester, N.Y.</u>	Age <u>22</u> <u>4/22/1936</u>
Occupation <u>Clerk - Grocery</u>	No. of marriage <u>1st</u>	Occupation <u>Accounting - Telephone Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead <u>none</u>	Birthplace <u>Buffalo, N.Y.</u>	Former husband or husbands living or dead <u>none</u>
Father <u>Nicholas Di Salvo</u>	Divorced	Father <u>Joseph Schillaci</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Josephine Madeline Musso</u>	" where	Mother <u>Minnie Schillaci</u>	" where
Birthplace <u>U.S.</u>	against whom	Birthplace <u>Italy</u>	against whom
Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>7-30-58</u>	Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>7-30-58</u>
Physician's Statement <u>Dr. J. N. McEachern</u>	Date <u>7-28-58</u>	Physician's Statement <u>Dr. J. N. McEachern</u>	Date <u>7-28-58</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug 18 1958</u> License <u>Aug 18 1958 3:00 P.M.</u> Marriage <u>Aug 23 1958 11:00 A.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>		Date: Affidavit <u>Aug 18 1958</u> License <u>Aug 18 1958 3:00 P.M.</u> Marriage <u>Aug 23 1958 11:00 A.M.</u> Place of Marriage <u>East Rochester, N.Y.</u>	
Official <u>Rev. Roy B. Morphy</u> Profession <u>Catholic Priest</u>		Official <u>Rev. Roy B. Morphy</u> Profession <u>Catholic Priest</u>	
Period for solemnization of marriage begins at <u>3:03 P.M.</u> on the <u>19th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>17th</u> day of <u>October</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>3:03 P.M.</u> on the <u>19th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>17th</u> day of <u>October</u> 19 <u>58</u>	

City Perinton County Morose STATE OF NEW YORK No. 41
Town Perinton Clerk E. Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Eugene Joseph Jackson</u>	Color <u>white</u>	Name <u>Gail Margaret McMalon</u>	Color <u>white</u>
Residence <u>317 E. Elm St. East Rochester, N.Y.</u>	Age <u>23</u> <u>8/25/1934</u>	Residence <u>353 Rank St. Fairport, N.Y.</u>	Age <u>20</u> <u>3/24/1938</u>
Occupation <u>Inspector - Car Company</u>	No. of marriage <u>1st</u>	Occupation <u>IBM Dept. - Gas & Electric Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>East Rochester, N.Y.</u>	Former wife or wives living or dead <u>none</u>	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead <u>none</u>
Father <u>James Stuart Jackson</u>	Divorced	Father <u>Michael Elmer McMalon</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Canada</u>	" when
Mother <u>Martha Helen Hudson</u>	" where	Mother <u>E. Ethel Adams</u>	" where
Birthplace <u>U.S.</u>	against whom	Birthplace <u>U.S.</u>	against whom
Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>8-15-58</u>	Laboratory Statement <u>Monroe County Laboratories</u>	Date <u>8-15-58</u>
Physician's Statement <u>Dr. W. Church St. Fairport, N.Y.</u>	Date <u>8-12-58</u>	Physician's Statement <u>Dr. W. Church St. Fairport, N.Y.</u>	Date <u>8-12-58</u>
Examination requirements <u>were not</u>	dispensed with by judge or justice	Examination requirements <u>were not</u>	dispensed with by judge or justice
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug 18 1958</u> License <u>Aug 18 1958 4:00 P.M.</u> Marriage <u>Sept 19 1958 10:00 A.M.</u> Place of Marriage <u>Fairport, N.Y.</u>		Date: Affidavit <u>Aug 18 1958</u> License <u>Aug 18 1958 4:00 P.M.</u> Marriage <u>Sept 19 1958 10:00 A.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	
Official <u>James A. Kelly</u> Profession <u>Catholic Priest</u>		Official <u>James A. Kelly</u> Profession <u>Catholic Priest</u>	
Period for solemnization of marriage begins at <u>4:04 P.M.</u> on the <u>19th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>17th</u> day of <u>October</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>4:04 P.M.</u> on the <u>19th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>17th</u> day of <u>October</u> 19 <u>58</u>	

RECORD OF MARRIAGES

Sagoy State Comm. 8 Health 9-1-58
mailed State Dept. 8 Health 9-5-58

City Perinton County Monroe STATE OF NEW YORK No. 42
 Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Thomas Allan Solberg</u>	Color <u>white</u>	Name <u>Lee Foster</u>	Color <u>white</u>
Residence <u>140 W. Church St. Fairport, N.Y.</u>	Age <u>25</u> <u>3/23/1933</u>	Residence <u>140 W. Church St. Fairport, N.Y.</u>	Age <u>18</u> <u>9/13/1939</u>
Occupation <u>Student - College</u>	No. of marriage <u>1st</u>	Occupation <u>Student - College</u>	No. of marriage <u>1st</u>
Birthplace <u>Barbers Prairie, Minn.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Francis Alvin Solberg</u>	Divorced	Father <u>F. Gordon Foster</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Blady Louise Knott</u>	" where	Mother <u>Maria Bertrude Eisenhart</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>8-19-58</u>	Date <u>8-19-58</u> (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>8-19-58</u>	Date <u>8-19-58</u> (Test completed)
Physician's Statement <u>Dr. J. W. McCarroll 20 W. Church St. Fairport, N.Y.</u> Date <u>8-17-58</u>	Date <u>8-17-58</u> (Specimen taken)	Physician's Statement <u>Dr. J. W. McCarroll 20 W. Church St. Fairport, N.Y.</u> Date <u>8-12-58</u>	Date <u>8-12-58</u> (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug 21, 1958</u> License <u>Aug 21, 1958 11:16 A.M.</u> Marriage <u>Aug 23, 1958 2:30 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Aug 21, 1958</u> License <u>Aug 21, 1958 11:16 A.M.</u> Marriage <u>Aug 23, 1958 2:30 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Clifford S. Brunner</u> Profession <u>Clergyman</u>	Witness <u>William Solberg, Alexandria, Minn.</u>	Official <u>Clifford S. Brunner</u> Profession <u>Clergyman</u>	Witness <u>William Solberg, Alexandria, Minn.</u>
Period for solemnization of marriage begins at <u>11:16 A.M.</u> on the <u>23rd</u> day of <u>Aug.</u> 19 <u>58</u> and ends the <u>20th</u> day of <u>Oct.</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>11:16 A.M.</u> on the <u>23rd</u> day of <u>Aug.</u> 19 <u>58</u> and ends the <u>20th</u> day of <u>Oct.</u> 19 <u>58</u>	

Sagoy State Comm. 8 Health 9-1-58
mailed State Dept. 8 Health 9-5-58

City Perinton County Monroe STATE OF NEW YORK No. 43
 Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Daniel Herman Piccarelli</u>	Color <u>white</u>	Name <u>Lucy Lena Crocetti</u>	Color <u>white</u>
Residence <u>8 Elm St. Fairport, N.Y.</u>	Age <u>33</u> <u>Feb. 2, 1925</u>	Residence <u>52 State St. Fairport, N.Y.</u>	Age <u>24</u> <u>July 7, 1934</u>
Occupation <u>Assembly - Manufacturing Co.</u>	No. of marriage <u>1st</u>	Occupation <u>Office Clerk - Manufacturing Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Fairport, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Daniel Piccarelli</u>	Divorced	Father <u>John Crocetti</u>	Divorced
Birthplace <u>Italy</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Minnie Elizabeth Zampini</u>	" where	Mother <u>Mary Lena Scarrizzo</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u> Date <u>8-15-58</u>	Date <u>8-15-58</u> (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u> Date <u>8-15-58</u>	Date <u>8-15-58</u> (Test completed)
Physician's Statement <u>Dr. W. Wilbur S. Bullock 20 W. Church St. Fairport, N.Y.</u> Date <u>8-13-58</u>	Date <u>8-13-58</u> (Specimen taken)	Physician's Statement <u>Dr. W. Wilbur S. Bullock 20 W. Church St. Fairport, N.Y.</u> Date <u>8-13-58</u>	Date <u>8-13-58</u> (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug 23, 1958</u> License <u>Aug 23, 1958 10:54 A.M.</u> Marriage <u>Aug 30, 1958 11:00 A.M.</u> Place of Marriage <u>Perinton, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Aug 23, 1958</u> License <u>Aug 23, 1958 10:54 A.M.</u> Marriage <u>Aug 30, 1958 11:00 A.M.</u> Place of Marriage <u>Perinton, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Bruce S. Quinn</u> Profession <u>Justice of the Peace</u>	Witness <u>Howard E. Moore, R.D. 1 Macedon, N.Y.</u>	Official <u>Bruce S. Quinn</u> Profession <u>Justice of the Peace</u>	Witness <u>Howard E. Moore, R.D. 1 Macedon, N.Y.</u>
Period for solemnization of marriage begins at <u>10:54 A.M.</u> on the <u>24th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>22nd</u> day of <u>October</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>10:54 A.M.</u> on the <u>24th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>22nd</u> day of <u>October</u> 19 <u>58</u>	

Sagoy State Comm. 8 Health 9-1-58
mailed State Dept. 8 Health 10-5-58

City Perinton County Monroe STATE OF NEW YORK No. 44
 Clerk Elizabeth H. Pierce

GROOM		BRIDE	
Name <u>Jerry Stanley Conking</u>	Color <u>white</u>	Name <u>June Elaine Steffen</u>	Color <u>white</u>
Residence <u>452 Linden Ave. Rochester, N.Y.</u>	Age <u>22</u> <u>5/23/36</u>	Residence <u>162 West Ave. Fairport, N.Y.</u>	Age <u>21</u> <u>4/6/1937</u>
Occupation <u>Time Keeper - Manufacturing</u>	No. of marriage <u>1st</u>	Occupation <u>Hairdresser - Farmans Store</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead.	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead.
Father <u>Stanley Charles Conking</u>	Divorced	Father <u>Allan Louis Steffen</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>E. Irel Gertrude Street</u>	" where	Mother <u>Florence Bessie Abigail</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>8-15-58</u>	Date <u>8-15-58</u> (Test completed)	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester 20, N.Y.</u> Date <u>8-19-58</u>	Date <u>8-19-58</u> (Test completed)
Physician's Statement <u>Dr. W. Wilbur S. Bullock 20 W. Church St. Fairport, N.Y.</u> Date <u>8-12-58</u>	Date <u>8-12-58</u> (Specimen taken)	Physician's Statement <u>Dr. W. Wilbur S. Bullock 20 W. Church St. Fairport, N.Y.</u> Date <u>8-16-58</u>	Date <u>8-16-58</u> (Specimen taken)
Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)	Examination requirements <u>Were not</u> dispensed with by judge or justice	(Were or were not)
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	
Date: Affidavit <u>Aug 23, 1958</u> License <u>Aug 23, 1958 11:25 A.M.</u> Marriage <u>Sept 13-58 - 7:00 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)	Date: Affidavit <u>Aug 23, 1958</u> License <u>Aug 23, 1958 11:25 A.M.</u> Marriage <u>Sept 13-58 - 7:00 P.M.</u> Place of Marriage <u>Fairport, N.Y.</u>	(Month) (Day) (Year) (Hour)
Official <u>Harold Hewitt</u> Profession <u>Clergyman</u>	Witness <u>Bob S. Mallett - Fairport, N.Y.</u>	Official <u>Harold Hewitt</u> Profession <u>Clergyman</u>	Witness <u>Bob S. Mallett - Fairport, N.Y.</u>
Period for solemnization of marriage begins at <u>11:25 A.M.</u> on the <u>24th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>22nd</u> day of <u>October</u> 19 <u>58</u>		Period for solemnization of marriage begins at <u>11:25 A.M.</u> on the <u>24th</u> day of <u>August</u> 19 <u>58</u> and ends the <u>22nd</u> day of <u>October</u> 19 <u>58</u>	

RECORD OF MARRIAGES

City Perinton County Monroe STATE OF NEW YORK No. 45
 Clerk Elizabeth H. Pierce

Reported State Comm. of Health 9-7-58

GROOM		BRIDE	
Name <u>Phillip Robert Conklin</u>	Color <u>white</u>	Name <u>Nancy Jean Rinaldo</u>	Color <u>white</u>
Residence <u>211 W. Elm St. East Rochester, N.Y.</u>	Age <u>27</u> <u>7/4/1931</u>	Residence <u>11 Highland St. Fairport, N.Y.</u>	Age <u>21</u> <u>7/24/1937</u>
Occupation <u>Photographer - Electro Pressing Co.</u>	No. of marriage <u>1st</u>	Occupation <u>Accounting - Telephone Co.</u>	No. of marriage <u>1st</u>
Birthplace <u>Hammondsport, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Utica, N.Y.</u>	Former husband or husbands living or dead
Father <u>Otto Carr Conklin</u>	Divorced	Father <u>Joseph Rinaldo</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Tunisia</u>	" when
Mother <u>Helen B. Arden</u>	" where	Mother <u>Margaret Elizabeth Ford</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u> Date <u>8-12-58</u>	Date <u>8-12-58</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u> Date <u>8-12-58</u>	Date <u>8-12-58</u>
Physician's Statement <u>Dr. P. S. Hoffman 507 Main St. East Rochester, N.Y.</u> Date <u>8-8-58</u>	Date <u>8-8-58</u>	Physician's Statement <u>Dr. P. S. Hoffman 507 Main St. East Rochester, N.Y.</u> Date <u>8-8-58</u>	Date <u>8-8-58</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	

Mailed State Dept. of Health 9-5-58

Date: Affidavit Aug. 23 1958 License Aug. 23 1958 3:13 P.M. Marriage Aug. 30 1958 10 A.M. Place of Marriage Fairport, New York
 Official John B. Morgan Profession Catholic Priest Witness Mary Rinaldo - Sister St. Fairport, N.Y.
Richard Van Alder, 9 Davis St. Hammondsport, N.Y.
 Period for solemnization of marriage begins at 3:13 P.M. on the 24 day of August 1958 and ends the 22 day of October 1958

City Perinton County Monroe STATE OF NEW YORK No. 46
 Clerk Elizabeth H. Pierce

Reported State Comm. of Health 9-7-58

GROOM		BRIDE	
Name <u>Gerald Walter Billings</u>	Color <u>white</u>	Name <u>Gloria Ruth Marafioti</u>	Color <u>white</u>
Residence <u>225 Fulton Ave. Rochester, N.Y.</u>	Age <u>22</u> <u>Dec. 3 1935</u>	Residence <u>312 Gilbert Place, East Rochester, N.Y.</u>	Age <u>24</u> <u>4/28/1934</u>
Occupation <u>Photographic - Roberts Photochemical</u>	No. of marriage <u>1st</u>	Occupation <u> stenographer - General Electric Rochester, N.Y.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Walter Acea Billings</u>	Divorced	Father <u>Frank Marafioti</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>Italy</u>	" when
Mother <u>Edna Scheneb</u>	" where	Mother <u>Carmella Cardella</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Rochester Health Bureau Laboratory Rochester, N.Y.</u> Date <u>8-13-58</u>	Date <u>8-13-58</u>	Laboratory Statement <u>Rochester Health Bureau Lab. Rochester, N.Y.</u> Date <u>8-13-58</u>	Date <u>8-13-58</u>
Physician's Statement <u>Dr. Kurt P. Cabrey 16 N. Goodman St. Rochester, N.Y.</u> Date <u>8-9-58</u>	Date <u>8-9-58</u>	Physician's Statement <u>Dr. Kurt P. Cabrey 16 N. Goodman St. Rochester, N.Y.</u> Date <u>8-9-58</u>	Date <u>8-9-58</u>
Examination requirements <u>Were not</u> dispensed with by judge or justice		Examination requirements <u>Were not</u> dispensed with by judge or justice	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Consent by _____ Relation _____ Date _____		Consent by _____ Relation _____ Date _____	
Proof of age _____ (Form)		Proof of age _____ (Form)	

Mailed State Dept. of Health 10-5-58

Date: Affidavit Aug. 25 1958 License Aug. 25 1958 2:00 P.M. Marriage Sept. 6 1958 11:20 A.M. Place of Marriage Rochester, N.Y.
 Official Edward P. Coleman Profession Priest Witness Bonnie Shellaney - 319 Gilbert St. East Rochester, N.Y.
Marion A. Thomas - 611 Edgemoor St. Rochester, N.Y.
 Period for solemnization of marriage begins at 2:00 P.M. on the 26th day of August 1958 and ends the 24th day of October 1958

City Perinton County Monroe STATE OF NEW YORK No. 47
 Clerk Elizabeth H. Pierce

Reported State Comm. of Health 10-1-58

GROOM		BRIDE	
Name <u>David Allison Kier</u>	Color <u>white</u>	Name <u>Mabel Mae Dean</u>	Color <u>white</u>
Residence <u>53 Summit St. Fairport, N.Y.</u>	Age <u>20</u> <u>Dec. 5 1937</u>	Residence <u>17 Durant Place Fairport, N.Y.</u>	Age <u>18</u>
Occupation <u>Installing Signs, N.Y. State Highways</u>	No. of marriage <u>1st</u>	Occupation <u>Packing work, Greenhouse Rochester, N.Y.</u>	No. of marriage <u>1st</u>
Birthplace <u>Rochester, N.Y.</u>	Former wife or wives living or dead	Birthplace <u>Rochester, N.Y.</u>	Former husband or husbands living or dead
Father <u>Edison Allison Kier</u>	Divorced	Father <u>Clifford Allen Dean</u>	Divorced
Birthplace <u>U.S.</u>	" when	Birthplace <u>U.S.</u>	" when
Mother <u>Beatrice Delia Maine</u>	" where	Mother <u>Beryl Arley Applebee</u>	" where
Birthplace <u>U.S.</u>	" against whom	Birthplace <u>U.S.</u>	" against whom
Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u> Date <u>9-5-58</u>	Date <u>9-5-58</u>	Laboratory Statement <u>Monroe County Laboratories 435 E. Henrietta Rd. Rochester, N.Y.</u> Date <u>9-5-58</u>	Date <u>9-5-58</u>
Physician's Statement <u>P. S. Hoffman 507 Main St. Fairport, N.Y.</u> Date <u>8-30-58</u>	Date <u>8-30-58</u>	Physician's Statement <u>G. N. McCallum 70, 30 Main St. Fairport, N.Y.</u> Date <u>8-30-58</u>	Date <u>8-30-58</u>
Examination requirements <u>were not</u> dispensed with by judge or justice		Examination requirements <u>were not</u> dispensed with by judge or justice	
Consent by <u>David Allison Kier</u> Relation <u>father</u> Date <u>9-8-58</u>		Consent by _____ Relation _____ Date _____	
Consent by <u>Beatrice D. Kier</u> Relation <u>mother</u> Date <u>9-8-58</u>		Consent by _____ Relation _____ Date _____	
Proof of age <u>certified birth</u> (Form)		Proof of age <u>birth record</u> (Form)	

Mailed State Dept. of Health 10-5-58

Date: Affidavit Sept. 8 1958 License Sept. 8 1958 4:00 P.M. Marriage Sept. 13 1958 2:10 P.M. Place of Marriage Fairport, N.Y.
 Official Maude Eugene Sears Profession Clergyman Witness Clifford Alan Dean - 230 Edgemoor Ave. Fairport, N.Y.
 Period for solemnization of marriage begins at 4:15 P.M. on the 9 day of September 1958 and ends the 7 day of November 1958

RECORD OF MARRIAGES

mailed state cert of Health 10-1-58

mailed state cert of Health 10-5-58

mailed state cert of Health 10-1-58

mailed state cert of Health 10-5-58

mailed state cert of Health 10-1-58

mailed state cert of Health 10-5-58

City Perinton County Monroe STATE OF NEW YORK No. 48
Clerk Elizabeth H. Pierson

GROOM

Name Phillip Gordon Christmas Color White
 Residence 57 South Ave. Fairport N.Y. Age 21 Aug. 7-1937
 Occupation Sales, Can Company No. of marriage 1st
 Birthplace Fairport N.Y. Former wife or wives living or dead
 Father Gordon Freeman Christmas Divorced
 Birthplace U.S. " when
 Mother Leah Bell Blessing " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Substation
435 E. Henrietta Rd. Rochester N.Y. Date 9-3-58 (Test completed)
 Physician's Statement John Kraai, Fairport N.Y. Date 8-29-58
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Donna Marie Shelhamer Color White
 Residence 319 Ellet Place, East Rochester N.Y. Age 20 Dec. 4-1937
 Occupation Printing, Reproduction Todd Co. No. of marriage 1st
Rochester N.Y. Former husband or husbands living or dead
 Father Donald Jay Shelhamer Divorced
 Birthplace U.S. " when
 Mother Edna Ruth Otley " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Substation
435 E. Henrietta Rd. Rochester N.Y. Date 9-3-58 (Test completed)
 Physician's Statement John Kraai, Fairport N.Y. Date 8-29-58
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit Sept 9-1958 License Sept 9-1958 4:40 P Marriage Sept 13-1958 7:30 P.M. Place of Marriage East Rochester N.Y.
 Official Carl T. Wickhoff Profession Clergyman Witness Bonnie Shelhamer East Rochester N.Y.
 Period for solemnization of marriage begins at 4:40 P.M. on the 10 day of September 1958 and ends the 8 day of November 1958

City Perinton County Monroe STATE OF NEW YORK No. 49
Clerk Elizabeth H. Pierson

GROOM

Name Harold Oscar Suhn Color White
 Residence 77 99 Calmwood Rd. Fairport N.Y. Age 24 July 11-1934
 Occupation Truck Driver, Transportation Co. No. of marriage 1st
 Birthplace Fairport N.Y. Former wife or wives living or dead
 Father Maunice Thomas Suhn Divorced
 Birthplace U.S. " when
 Mother Nellie Ellen Dean " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Substation
435 E. Henrietta Rd. Rochester N.Y. Date 9-12-58 (Test completed)
 Physician's Statement John Kraai, Fairport N.Y. Date 9-9-58
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

BRIDE

Name Patricia June Rudy Color White
 Residence 26 Wood Lane, Fairport N.Y. Age 19 Dec 5-1938
 Occupation At home No. of marriage 1st
 Birthplace Fairport N.Y. Former husband or husbands living or dead
 Father Stephen Rudy Divorced
 Birthplace U.S. " when
 Mother Charabell Bernaine Neiss " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Substation
435 E. Henrietta Rd. Rochester N.Y. Date 9-12-58 (Test completed)
 Physician's Statement John Kraai - Fairport N.Y. Date 9-9-58
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit Sept 15-1958 License Sept 15-1958 7:45 P Marriage Sept 20-1958 11:00 AM Place of Marriage Pittsford N.Y.
 Official Rev. Robert C. McNamee Profession Catholic Priest Witness Maunice Suhn, 520 Savard St. Pittsford N.Y.
 Period for solemnization of marriage begins at 7:45 P.M. on the 16 day of Sept. 1958 and ends the 14th day of November 1958

City Perinton County Monroe STATE OF NEW YORK No. 50
Clerk Elizabeth H. Pierson

GROOM

Name Jack Dale Buse Color White
 Residence 905 South Main St. East Rochester N.Y. Age 23 July 18, 1935
 Occupation Assembly machinist No. of marriage 1st
 Birthplace Fairport N.Y. Former wife or wives living or dead
 Father Alan S. Buse Divorced
 Birthplace U.S. " when
 Mother Hilda B. Pylson " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Substation
435 E. Henrietta Rd. Rochester N.Y. Date 9-16-58 (Test completed)
 Physician's Statement William S. Bush
20 West Church St. Fairport N.Y. Date 9-12-58 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age Automobile driver's license (Form)

BRIDE

Name Joyce Ann McInerney Color White
 Residence 230 W. Whitney Rd. Canfield N.Y. Age 21 March 6, 1937
 Occupation Postal Clerk - William Walsh No. of marriage 1st
East Rochester N.Y. Former husband or husbands living or dead
 Father Joseph Ernie McInerney Divorced
 Birthplace U.S. " when
 Mother Henrietta Homeath " where
 Birthplace U.S. " against whom
 Laboratory Statement Monroe County Substation
435 E. Henrietta Rd. Rochester N.Y. Date 9-16-58 (Test completed)
 Physician's Statement William S. Bush
20 West Church St. Fairport N.Y. Date 9-12-58 (Specimen taken)
 Examination requirements Were not dispensed with by judge or justice
 Consent by _____ Relation _____ Date _____
 Consent by _____ Relation _____ Date _____
 Proof of age _____ (Form)

Date: Affidavit Sept 18-1958 License Sept 18-1958 10:51 Marriage Sept 20-1958 2:00 P.M. Place of Marriage East Rochester N.Y.
 Official Walter C. Paul Profession Clergyman Witness Paul D. Allen - 183 S. 2nd St. Rochester 23, N.Y.
 Period for solemnization of marriage begins at 10:51 A.M. on the 19th day of September 1958 and ends the 17th day of November 1958

COURT ORDERS

License #	Groom and Bride	Name of Judge	Date
38-1954	David Paul Cherry and Kathryn Anne Lobdell	Charles B. Brassier	7/1/54
43-1954	Peter Bernard Vandewall and Dianne May Lincoln	Thomas J. Macghey	7/31/54
57-1955	Wilmer Franklin Spentanz and Joan Van Hise	D. J. D'Arcy	12/22/55
34-1957	Donald Harold Ewing and Patricia Ann Shanow	Maurice W. McEann	9-4-57