

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

STATE OF INDIANA
APPLICATION FOR MARRIAGE LICENSE

No. _____
File _____
8-8-85
Date of Application

MONTGOMERY County

MALE
Medical Examination Report Dated 8-8-85
Name of Physician Dr. Zmunt

FEMALE
Medical Examination Report Dated 8-8-85
Name of Physician Dr. Zmunt

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

MALE APPLICANT
Name James David Simmons
Date of Birth 12/4/53
Place of Birth Greencastle Ind
Residence Address 28 Park Forest Crawfordsville Ind
Previous Marital Status: Never Married [] OR []
Last Marriage Ended By: Death [] Divorce [x] Annulment []
Date of birth verified by: [x] Birth Certificate [] Judicial Decree

FEMALE APPLICANT
Name Jeanise Peffley
Date of Birth 4/6/58
Place of Birth Crawfordsville Ind
Residence Address 28 Park Forest Crawfordsville Ind
Previous Marital Status: Never Married [] OR []
Last Marriage Ended By: Death [] Divorce [x] Annulment []
Date of birth verified by: [] Birth Certificate [] Judicial Decree

- 1. Are you now or have you ever been adjudged to be of unsound mind? No [x] Yes []
- 2. Are you afflicted with a transmissible disease? No [x] Yes []
- 3. Are you related to the female applicant closer than second cousin? No [x] Yes []
- 4. Are you now under the influence of intoxicating liquor? No [x] Yes []
- 5. Are you now under the influence of a narcotic drug? No [x] Yes []
- 6. List the full names of any dependent children.

- 1. Are you now or have you ever been adjudged to be of unsound mind? No [x] Yes []
- 2. Are you afflicted with a transmissible disease? No [x] Yes []
- 3. Are you related to the male applicant closer than second cousin? No [x] Yes []
- 4. Are you now under the influence of intoxicating liquor? No [x] Yes []
- 5. Are you now under the influence of a narcotic drug? No [x] Yes []
- 6. List the full names of any dependent children.

Briely James Simmons 10

Natacha Danielle Peffley 4
Andrea Brynn Peffley 2

7. Are you required by any court order or orders to support the above dependent children? No [] Yes [x]

7. Are you required by any court order or orders to support the above dependent children? No [x] Yes []

8. Full name of father: Bolly Ray Simmons
Residence of father (if deceased so state): R#4 Zuluie Ind.

8. Full name of father: Albert Stanley Delano
Residence of father (if deceased so state): New Market Ind.

9. Full maiden name of mother: Mary Jane Elrod
Residence of mother (if deceased so state): R#4 Zuluie Ind.

9. Full maiden name of mother: Beverly Jean Cape
Residence of mother (if deceased so state): New Market Ind.

I depose and state the information given in this application is true and correct.
Signed: James David Simmons
New Address: _____
Subscribed and sworn to before me this 8 day of August 19 85
Rebecca Reddick Clerk MONTGOMERY Circuit Court

I depose and state the information given in this application is true and correct.
Signed: Jeanise Peffley
New Address: 28 Park Forest
Subscribed and sworn to before me this 8 day of August 19 85
Rebecca Reddick Clerk MONTGOMERY Circuit Court

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

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

State of Indiana, } ss:
County of Montg }
Signed: _____ Father
Signed: _____ Mother
Subscribed and sworn to before me this _____ day of _____, 19 _____
Clerk

State of Indiana, } ss:
County of Montg }
Signed: _____ Father
Signed: _____ Mother
Subscribed and sworn to before me this _____ day of _____, 19 _____
Clerk

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

RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage license issued by the clerk of the _____ County _____ Circuit Court of Indiana dated the _____ day of _____, 19 _____, authorizing the joining together as husband and wife _____ and _____
Be it further remembered, the following marriage certificate was filed in my office, to-wit:
I, _____ hereby certify that on the _____ day of _____, one thousand nine hundred and _____ at _____ County of _____ State of Indiana, Groom _____ and, Bride _____ were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of _____ County.
Dated this _____ day of _____, 19 _____
Signed: _____

Filed and recorded in accordance with the laws of the State of Indiana this _____ day of _____, 19 _____
Signed: _____ Clerk
MONTGOMERY Circuit Court