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STATE FILE NUMBER

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State of Delaware

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		DIVISION OF	
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PUBLIC HEALTH

LOCAL	
REGISTRAR'S	NO.

49/30

NO. LICENSE

LICENSE

BRIDE Dover, Del NO APPLICATION 1 ISSUED GROOM FIRST MIDDLE MIDDLE LAST Donald Richard Landing
STATE COUNTY MAIDEN NAME___ Arlena Lynne Lee RESIDENCE Delaware Kent Delaware CITY, TOWN, OR LOCATION Dover DATE OF BIRTH DATE OF BIRTH AGE RACE AGE RACE White (1st, 2d, 3d, etc.) 2-27-53 (Single, widower, or divorced) NUMBER (1st, 2d, 3d, etc.)
OF THIS
MARRIAGE 10-12-56 (Single, widow, or divorced) NUMBER OF THIS MARRIAGE PREVIOUS MARITAL PREVIOUS MARITAL STATUS STATUS Single
BIRTHPLACE (STATE OR POREIGN COUNTRY) lst STATUS SINCTLO Mississippi USUAL OCCUPATION USUAL OCCUPATION Student NAME FIRST Student Billy Landing
BIRTHPLACE (STATE OR POREIGN COUNTRY) Virginia MAIDEN NAME PIRST MAIDEN NAME PIRM Lois Taylor
BIRTHPLACE (STATE OR FOREIGN COUNTRY) BIRTHPLACE (STATE OR POREIGN COUNTRY) Virginia

II	hereby certify tha	t on the	2nd	_da	y of	: Au	igu	st		19.75	2:00 HOUR	P. /	M
the	aforementioned	persons	were	by	me	united	in	marriage	at_	Dover,	Delaware		

Kent County of_ in accordance with the Laws of the State of Delaware.

Signature of Clergyman or Other Official Delaware

COUNTY Kent RESIDENCE-STATE Witnesses 1. NAME required.) 2. NAME

3. NAME RESIDENCE

LOCAL REGISTRAR'S SIGNATURE

AUG 8 1975

0 059427

I certify this is an actual copy of the official record filed with this office.

Ed Illina M.D. State Registrar 19901 DOVER DELAWARE Delaware State Board of Health

DEC 16 1975

Place Issued

