This return is to be carefully filled out at the time of the marriage. This Return does not take the place of the Certificate on the reverse side of this Liceuse, but is IN ADDITION THERETO.

ILLINOIS STATE BOARD OF HEALTH.	
Ruthen of a Marriage to the County Clark.	**
1. Full Name of GROOM George W Gilmore	
Disease Paridonne	
3. Occupation Romand	
4. Age next Birthday, 69 years. Color White Race Good Canadran	••
5. Place of Birth toronto Carada	
6. Father's Name homes Siloured	*
7. Mother's Maiden Name Marga Read	•
8. No. of Groom's Marriage thing	
9. Full Name of BRIDE 6 Heem Just	
Maiden Name, if a Widow Othis matter	
10. Place of Residence Blokenand Paylins Lo. Kansa.  11. Agencie Birthaugust / years. Color Mobile Race America	
12. Place of Birth Whitevile Co. Illinos	rija se iga
13. Father's Name Jornan mattern	
14. Mother's Maiden Name June Wright	
15. No. of Bride's Marriage of Thurs	
16. Married at morrison in the County of	
Mentioned and State of Illinois, the Say of May 1899	
N. B.—At Nos. 8 and 15 state whether 1st, and, 304 sth., 6st., martiage of each 1.47 give names of subscribing witnesses to the Marriage Certificate. If no subscribing witnesses, give names of two persons who witnessed the ceremony.	
We hereby Certify, that the information above given is correct, to the best of our knowledge and belief.	
Groom)	,
& Min M Dines	
(Bride.)	
this 18 day of May 1899 Colors Magistre	to
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and the second s	B
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Lice 2 188 188 188 188 188 188 188 188 188 1	
1. Chen.  1. Che	
AND	
The state of the s	
No. 16	
No. 12 38 C.	
No. 19 No	
Married May 18 188  Begintered May 18 188  Begintered May 18 188  Begintered May 18 188  Begintered May 18 188	