

STATE OF OREGON,

County of Multnomah

ss.

No 30318

THIS IS TO CERTIFY, That the undersigned, a District Judge  
 by the authority of a Marriage License bearing date the 30 day of July, A. D. 1952  
 and issued by the County Clerk of the County of Multnomah, did on the 30<sup>th</sup>  
 day of July, A. D. 1952, at Portland  
 in the County and State aforesaid, join in lawful wedlock E. Joe Smith  
 of the County of King, and State of Washington, and  
Adrienne B. Bankert of the County of King, and State of  
Washington, with their mutual assent in the presence of Cathryn Massey  
 and Clara E. Lamvik Witnesses.

(Name of Male)  
(Name of Female)

(First Witness)

(Second Witness)

Witness my hand,

J. R. Meard  
 District Judge  
 (Number—Street) (City or Town) (State)

THIS CERTIFICATE, properly filled out **MUST BE RETURNED TO SI COHN, COUNTY CLERK OF MULTNOMAH COUNTY, WITHIN THIRTY DAYS** from the date of the Marriage, under penalty. If the marriage is solemnized in another county, a duplicate must be sent to the County Clerk of that county also within thirty days, under penalty.

Two witnesses are required.

My Minister's License is recorded in \_\_\_\_\_ County.

SEND THIS PART TO COUNTY CLERK AT ONCE

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No 30318

Date Issued July 20 1952, 19    

E. Joe Smith  
and

Adrienne B. Bankert

**Marriage Certificate**

OFFICE OF COUNTY CLERK  
WILMINGTON COUNTY, OREGON

FILED

AUG 19 1952

SI COHN, Clerk  
M. KLEES, Deputy

76 30318

THIS CERTIFICATE IS VALID ONLY WHEN FILED IN THE OFFICE OF THE COUNTY CLERK OF WILMINGTON COUNTY, OREGON, WITHIN THIRTY DAYS FROM THE DATE OF ISSUANCE. IF NOT SO FILED, IT IS VOID.

# Medical Certificate for Marriage License

STATE OF OREGON,

County of Multnomah } ss.

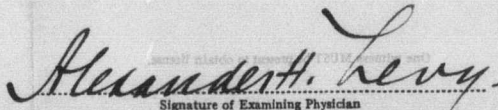
I, Alexander H. Levy, M. D., certify that I am a physician duly authorized to practice within the State of Oregon by the State Medical Examining Board;

That the confidential standard questionnaire has been answered and filed in accordance with provisions of Chapter 434, Oregon Laws 1937; as amended by Chapter 161, Oregon Laws 1949;

That on this 28th day of July, 1952, I made a mental and physical examination of Elmon Joe Smith a male person who has applied to a County Clerk of the State of Oregon for a marriage license;

That required laboratory tests were made on 29 day of July, 1952, at State laboratory, No. 1, a laboratory approved by the State Board of Health, and received by me the 30th day of July, 1952;

That at the time of said examination I found said applicant to the best of my knowledge and belief not afflicted with epilepsy, feeble-mindedness, insanity, drug addiction, chronic alcoholism, and free from contagious or infectious venereal diseases.

  
Signature of Examining Physician

This certificate must be presented to the County Clerk within ten days of the date of application for a marriage license.

No. 30378

**Medical Certificate**  
FOR

**Marriage License**

Sec. 33-120. All fees and charges of any physician making the necessary examination of and issuing the necessary certificate to any one party, as herein provided, shall not exceed the sum of \$5 for each person examined.

**OFFICE OF COUNTY CLERK**  
**MULTNOMAH COUNTY, OREGON**

**FILED**  
**JUL 30 1952**  
**ST COHN, CLERK**  
**T. E. POTTS, Deputy**

One witness MUST be present to obtain license.

**THIS SHOULD BE FILLED IN BY APPLICANT**

**FULL NAME** Edmond Joe Smith **Color or RACE** Negro

**ADDRESS** Unit 2 King County Hosp. **CITY** Seattle

**STATE** Washington **COUNTY** King

**BIRTHPLACE** Cleveland, Ohio **BIRTHDATE** 1-10-27 **AGE** 25

State and County

**NO. OF THIS MARRIAGE** 1 2 3 etc. **SINGLE** **WIDOWED**

**OCCUPATION** Hospital Attendant **DIVORCED** When Where

**FATHER'S NAME** Joseph Smith **BIRTHPLACE** Ky.

**MOTHER'S NAME** Lillian Smith **BIRTHPLACE** W. Va.

State or Country

+ Edmond J. Smith  
Signature of Applicant

One witness who knows both parties MUST be present to obtain license.

*Order*

# Medical Certificate for Marriage License

STATE OF OREGON,  
County of Multnomah..... } ss.

I, Alexander H. Levy, M. D......, certify  
that I am a physician duly authorized to practice within the State of Oregon by the State Medical  
Examining Board;

That the confidential standard questionnaire has been answered and filed in accordance  
with provisions of Chapter 434, Oregon Laws 1937; as amended by Chapter 161, Oregon Laws  
1949;

That on this 28th day of July, 1952, I made a mental and  
physical examination of Adrienne Bancroft..... a female..... person who has  
applied to a County Clerk of the State of Oregon for a marriage license;

That required laboratory tests were made on 29th day of July, 1952,  
at State..... laboratory, No. 1....., a laboratory approved by the State  
Board of Health, and received by me the 30th day of July, 1952;

That at the time of said examination I found said applicant to the best of my knowledge  
and belief not afflicted with epilepsy, feeble-mindedness, insanity, drug addiction, chronic alco-  
holism, and free from contagious or infectious venereal diseases.

Alexander H. Levy, M. D.  
Signature of Examining Physician

This certificate must be presented to the County Clerk within ten days of the date of  
application for a marriage license.

No. ....

# Medical Certificate FOR Marriage License

Sec. 33-120. All fees and charges of any physician making the necessary examination of and issuing the necessary certificate to any one party, as herein provided, shall not exceed the sum of \$5 for each person examined.

One witness MUST be present to obtain license.

order

### THIS SHOULD BE FILLED IN BY APPLICANT

FULL NAME Adrienne Beth BANKERT Color or RACE White  
 ADDRESS Seattle, Washington <sup>2005 Spring</sup> CITY Seattle  
 STATE Washington COUNTY King  
 BIRTHPLACE Brookings, South Dakota BIRTHDATE Oct 15, 1928 AGE 33  
State and County  
 NO. OF THIS MARRIAGE  1  2  3 or SINGLE  WIDOWED  
 OCCUPATION NURSE DIVORCED When Where  
 FATHER'S NAME Rex N. BANKERT BIRTHPLACE Inwood, Iowa  
State or Country  
 MOTHER'S NAME Carmen M. BANKERT BIRTHPLACE Rochester, Minn.  
State or Country  
Adrienne Bankert  
 Signature of Applicant

One witness who knows both parties MUST be present to obtain license.