

# RECORD OF MARRIAGES

REGISTERED NO. 49813 MARRIAGE LICENSE  
John W. Dunne of New Rochelle in the county of West  
 and State of New York, and Edna Hone of Portchester in the county of West  
West and State of New York at Portchester this 22 day of Oct  
 nineteen hundred and 25

[SEAL]

The following is a full and true abstract of all the facts disclosed by the above-named applicants in their verified statements presented to me upon their applications for the above license:

FROM THE GROOM		FROM THE BRIDE	
NAME . . . <u>John W. Dunne</u> <small>GIVE FULL NAME</small>	NO. OF MARRIAGE <u>1st</u> <small>I have not to my knowledge been infected with any venereal disease, or if I have been so infected within five years I have had a laboratory test within that period which shows that I am now free from infection from any such disease.</small>	NAME <u>Edna Hone</u> <small>GIVE FULL NAME</small>	NO. OF MARRIAGE <u>1st</u> <small>I have not to my knowledge been infected with any venereal disease, or if I have been so infected within five years I have had a laboratory test within that period which shows that I am now free from infection from any such disease.</small>
COLOR <u>Wh.</u> <small>RESIDENCE</small> <u>28 Franklin St. N. Rochelle</u>		COLOR <u>Wh.</u> <small>RESIDENCE</small> <u>No. Main St. Portchester N.Y.</u>	
AGE <u>21</u> <small>OCCUPATION</small> <u>P. O. Clerk</u>		AGE <u>18</u> <small>OCCUPATION</small> <u>Stenographer</u>	
BIRTHPLACE <u>West Rutland Vt Vermont</u>	FORMER WIFE OR WIVES LIVING OR DEAD	<u>N. Y. C.</u>	FORMER HUSBAND OR HUSBANDS LIVING OR DEAD
FATHER <u>John W. Dunne</u> <small>NAME OF</small>	DIVORCED	<u>John Hone</u> <small>NAME OF</small>	DIVORCED
BIRTHPLACE <u>Massa</u>	WHEN AND WHERE	<u>Ireland</u>	WHEN AND WHERE
MOTHER <u>Mary A. Troy</u> <small>MAIDEN NAME OF</small>	AGAINST WHOM	<u>Mary Bushley</u> <small>MAIDEN NAME OF</small>	AGAINST WHOM
BIRTHPLACE <u>Ireland</u>		<u>Ireland</u>	

**MARRIAGE CERTIFICATE**

I, John L. Coward OR John J. Jura residing at 143 Westchester county of West and State of New York do hereby certify that I did on this 22 day of Oct in the year A. D. 19 25 at Portchester in the county of West and State of New York solemnize the rites of matrimony between John W. Dunne of New Rochelle the county of West and State of New York and Edna Hone of Portchester in the county of West and State of New York in the presence of Esther Simonson and John L. Coward as witness and the license therefor is hereto annexed.

Witness my hand at Portchester in the county of West this 22 day of Oct A. D. 19 25

In presence of Esther Simonson (Signature of Witness) John L. Coward (Signature of Person Performing Ceremony)  
Portchester N.Y. (Address of Person Performing Ceremony)

**AFFIDAVIT FOR LICENSE TO MARRY**

STATE OF NEW YORK }  
 County of West }  
John W. Dunne groom, and Edna Hone bride, applicants for a license for marriage, being severally sworn, depose and say, that to the best of their knowledge and belief the statement respectively signed by them is true, and that no legal impediment exists as to the right of the applicants to enter into the marriage state.

Subscribed and sworn to before me this 22 day of Oct 19 25 Frank M. Lowenstein Clerk

**CERTIFICATE OF CONSENT**

This is to certify that \_\_\_\_\_, who have hereto subscribed \_\_\_\_\_ name, do hereby consent that \_\_\_\_\_ who is \_\_\_\_\_ (Name of Minor) (My or our Son, Daughter or Ward) and who is under the age of \_\_\_\_\_ years, shall be united in marriage to \_\_\_\_\_ by any minister of the gospel or other person authorized by law to solemnize marriages.

Witness my hand this \_\_\_\_\_ day of \_\_\_\_\_ A. D. 19 \_\_\_\_\_  
 (Signatures of Parents or Guardian)

This is to certify that \_\_\_\_\_, who have hereto subscribed \_\_\_\_\_ name, do hereby consent that \_\_\_\_\_ who is \_\_\_\_\_ (Name of Minor) (My or our Son, Daughter or Ward) and who is under the age of \_\_\_\_\_ years, shall be united in marriage to \_\_\_\_\_ by any minister of the gospel or other person authorized by law to solemnize marriages.

Witness my hand this \_\_\_\_\_ day of \_\_\_\_\_ A. D. 19 \_\_\_\_\_  
 (Signatures of Parents or Guardian)