

November 30, 2009

DATE OF APPLICATION

December 16, 2009

DATE CERTIFICATE FILED



285

STATE FILE NO.

40082

LOCAL FILE NO.

Marriage License

State of Michigan

To any person legally authorized to solemnize marriage in the State of Michigan, Marriage must be solemnized In The State Of Michigan on or before January 02, 2010 DATE

between

DAVID BRIAN STONE

and

TINA MAE KELLEY

FULL NAME OF MALE (First, Middle, Last)

FULL NAME OF FEMALE (First, Middle, Last)

LAST NAME BEFORE FIRST MARRIED, IF DIFFERENT

45

PRESENT AGE

5/27/1964

DATE OF BIRTH

44

PRESENT AGE

7/31/1965

DATE OF BIRTH

6021 Tomer Road

STREET

6580 South Bird Lake Road

STREET

Clayton, Michigan 49235

CITY, STATE, AND ZIP CODE

Osseo, Michigan 49266

CITY, STATE, AND ZIP CODE

Lenawee

RESIDENCE COUNTY

Two

NUMBER OF TIMES PREVIOUSLY MARRIED

Hillsdale

RESIDENCE COUNTY NUMBER OF TIMES PREVIOUSLY MARRIED

Three

Tecumseh, Michigan

BIRTHPLACE - CITY AND STATE

Hudson, Michigan

BIRTHPLACE - CITY AND STATE

Ray Dean Stone

FATHER'S FULL NAME

Timothy Michael Kelley

FATHER'S FULL NAME

Edith Fae Tillolson

MOTHER'S FULL NAME BEFORE FIRST MARRIED

Henrietta June Gilbert

MOTHER'S FULL NAME BEFORE FIRST MARRIED

Alabama

FATHER'S BIRTHPLACE

Michigan

MOTHER'S BIRTHPLACE

Michigan

FATHER'S BIRTHPLACE

Michigan

MOTHER'S BIRTHPLACE

An affidavit has been filed in this office by which it appears that said statements are true. This marriage license authorizes the marriage of the parties named above within the State of Michigan by any person authorized to perform a marriage ceremony under the laws of the State of Michigan.

In witness whereof,

I have signed and sealed these presents, this 3rd day of December 20 09

Marney M. Kast
Marney M. Kast - COUNTY CLERK

Hillsdale

COUNTY

DEPUTY CLERK

*Certificate of Marriage

I hereby certify that, in accordance with the above license, the persons herein mentioned were joined in marriage by me, in Osseo Jefferson Twp CITY, VILLAGE, OR TOWNSHIP, county of Hillsdale MICHIGAN,

on the 12th day of December A.D. 20 09, in the presence of

David Stone
SIGNATURE OF GROOM

Tina M Stone
SIGNATURE OF BRIDE

Steph M. Clark
SIGNATURE OF WITNESS

Vonnie Barnett
SIGNATURE OF WITNESS

Steph M. Clark
NAME OF WITNESS (TYPE OR PRINT)

Vonnie Barnett
NAME OF WITNESS (TYPE OR PRINT)

S. Eric Jackson
SIGNATURE OF MAGISTRATE OR CLERGY

S. Eric Jackson
NAME AND TITLE OF MAGISTRATE OR CLERGY (TYPE OR PRINT)

441 Heywood, Hartford, MI 49057
POST OFFICE ADDRESS OF MAGISTRATE OR CLERGY

Except for signature, spaces left blank must be completed by typewriter or printed legibly

By Authority of MCL 333.1313

This Space Reserved for Binding