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By Authority of MCL 333.2813

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12/22/92
DATE OF APPLICATION
JAN 12 1993
DATE CERTIFICATE FILED

Marriage License

STATE FILE NO
92-08875
LOCAL FILE NO
7291495

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 24, 1993
DATE

between

JAMES WALTER RUKKILA
FULL NAME OF MALE (FIRST, MIDDLE, LAST)

43
PRESENT AGE

DATE OF BIRTH

23360 CARLISLE
RESIDENCE NO STREET

HAZEL PARK MI 48030
CITY, STATE, AND ZIP CODE

OAKLAND 2
RESIDENCE COUNTY NUMBER OF TIMES PREVIOUSLY MARRIED

SCOTT CTY, VIRGINIA
BIRTHPLACE - CITY AND STATE

URHO WALTER RUKKILA
FATHER'S FULL NAME

KERTTO MARIA KUUSISTO
MOTHER'S FULL NAME BEFORE FIRST MARRIED

MICHIGAN FINLAND
FATHER'S BIRTHPLACE MOTHER'S BIRTHPLACE

JANE FRANCES ALEXANDER
FULL NAME OF FEMALE (FIRST, MIDDLE, LAST)

LAST NAME BEFORE FIRST MARRIED, IF DIFFERENT

43
PRESENT AGE

DATE OF BIRTH

23360 CARLISLE
RESIDENCE NO STREET

HAZEL PARK MI 48030
CITY, STATE, AND ZIP CODE

OAKLAND 2
RESIDENCE COUNTY NUMBER OF TIMES PREVIOUSLY MARRIED

DETROIT, MICHIGAN
BIRTHPLACE - CITY AND STATE

RAYMOND ALEXANDER
FATHER'S FULL NAME

LORETTA NORA MOONEY
MOTHER'S FULL NAME BEFORE FIRST MARRIED

OHIO MICHIGAN
FATHER'S BIRTHPLACE 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 25TH day of DECEMBER 19 92 ;

LYNN D. ALLEN COUNTY CLERK
OAKLAND COUNTY
[Signature] DEPUTY CLERK

* Certificate of Marriage

Between Mr. JAMES WALTER RUKKILA and M JANE FRANCES ALEXANDER

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

on the FIRST day of JANUARY A.D. 19 93, in the presence of

Jacqueline G. White SIGNATURE OF WITNESS
JACQUELINE G WHITE NAME OF WITNESS (TYPE OR PRINT)
Warren L. Johnson Jr. SIGNATURE OF WITNESS
WARREN L. JOHNSON JR. NAME OF WITNESS (TYPE OR PRINT)
Rev. Michael Loch SIGNATURE OF MAGISTRATE OR CLERGY
REV. MICHAEL LOCH NAME AND TITLE OF MAGISTRATE OR CLERGY (TYPE OR PRINT)
24740 W. 8 Mile Rd #5, Farm Hills, MI POST OFFICE ADDRESS OF MAGISTRATE OR CLERGY

THIS ORIGINAL COPY MUST BE RETURNED, WITHIN TEN DAYS AFTER THE MARRIAGE, TO THE OAKLAND COUNTY CLERK, UNDER SEVERE PENALTY.