BOOK 3 PAGE 58	
Commonwealth	of Massachusetts
County of Essex.	City of Lawrence.
hereby certify that the following is a true co	py from the Record of Marriages in said city.
	BRIDE  Name Mary J. Kelleran  Maiden Name == Widow or Divorced  Street and No. == City or Town Thomastown, Me.  Age 29 Years  Occupation == Place of Birth Thomastown, Me.  Name of Father Edward  Maiden Name of Mother Jane == First Marriage  Date of Marriage May 22, 1869  Date of Record June 26, 1869  HEREOF I have hereunto set my hand and affixed id city, this twenty-fourth day of other in the year nineteen hundred and four California.
the seal of sai	d city, this twenty-fourth day of abor in the year nineteen hundred and four
	CITY CLERK.

A ARTICLE AND A STATE OF THE ARTICLE AND A STATE
TASII. DIV.
3-1200
East Div. Extr.
Div. Div.
Department of the Interior.
Herbert Plalant
ile. 4. Reg't Man Mal & ON BUREAU OF PENSIONS,
Washington, D. C. September 20, 1898
R:
Will you kindly answer, at your earliest convenience, the questions enumerated below? The
formation is requested for future use, and it may be of great value to your family.
Very respectfully,
11 1 2 2
Herbest Telant 821
West Golden
mail 11 2 m
Modalisex leo , Mass,
No. 1. Are you a married man? If so, please state your wife's full name, and her maiden name.
nswer: Mary fane black Kellerand
08
No. 2. When, where, and by whom were you married? Answer: may 22-/867
Lewrence mass, Geo, Melson
Centilia eta Bita Hoo
No. 3. What record of marriage exists? Answer: Certificate 6 17 74 all
Lawrence massown Reserved Tretter me
No. 4. We are provided a remied of the place state the name of your former wife and the
No. 4. Were you previously married? If so, please state the name of your former wife and the
ate and place of her death or divorce. Answer:
No. 5. Have you any children living? If so, please state their names and the dates of their
irth. Answer: 3
Emery W Clark Feb, 28, 1870 Barles B Black Dec 3 1872
0 1/1 0 21 0
Henrietta In Black May 27 1875
Jan
SA 1 + 20
Date of reply, Tefat 22, 1898
Herbert J. Blank

## Commonwealth of Massachusetts.

UNITED STATES OF AMERICA.

## Certificate of Death FROM THE RECORDS OF DEATHS IN THE TOWN OF Action

		MASSACHUSETTS, U. S. A.
1.	Date of Death,	September 10 1914
2.	Name,	Herbert J. Clark
	(Maiden Name,	· · · · · · · · · · · · · · · · · · ·
3.	Sex, and whether Single.	male married
	Married, or Widowed, -	
4.	Color,	27
5.	Age,	71 Years 3. Months 19 Days
6.	Disease or Cause of Death	Arterio Selerosos
7.	Residence,	West Actor
8.	Occupation,	Wheelwright
9.	Place of Death,	West Actor
10.	Place of Birth,	Compton P. Q. Canada
11.	Name of Father,	Charles W. Clark
12.	Name of Mother, (Maiden Name)	Mary Ann. Bowen
13.	Birthplace of Father, -	Lancaster Mass,
14,	Birthplace of Mother, -	Lancaster St. 36.
15.	Place of Interment,	Att Hope Cem. West. Actor
-	4/	
	I, Horace	J. Cuttle depose and say
that	I hold the office of Tow	n Clerk of the Town of Action
Cou	inty of Middle	lesek and Commonwealth of Massachusetts; that the
		and Deaths in said Town are in my custody, and that the above is a
		rds of Deaths in said Town, as certified by me.
	WITNESS	my hand and the Seal of said Town, on the twenty first
		of December 19/4
		Theren It Tuttlant
		of orace, success



## London and Lancashire Fire Insurance Co. Ltd.

A.G.MÇILWAINE,JR. MANAGER. OF LIVERPOOL, ENGLAND.

EASTERN DEPARTMENT, HARTFORD, CONN.

A. M. WHITCOMB, Agent, WEST ACTON, MASS.

Lelette A Hall and Samuel & Gentford both of Actur, County of Middlesix and State have lived near neighbour to, and have bersmally hnown Herbert & Clark late of ctu Mass. and his wife Mary Turn than (40) forty years (and that they have lived together, as man and wing during this in this keriod, and that they were living together at the time of my Clarks death Sift 10th 1914. Car ages are 71 years and 72 years respectively and our post office adducer is West actus Mass. Delette H. Hall Jamuel A Guilfans West Actus Mass Dec 24th 1914 Middles x 55. Then personally appeared the alon named Elette N. Nacl and Samue of Guilford and made outh that the Statemente, herein centained are twee. Fustice of the peace

) THE PER	NSION CENTIFICATE SHOULD NOT BE FORWARDED WITH THE AFFEIGATION.
State of Mussa	Chester, country of Mulolly, 88:
On this day of day of	
appeared before me, a	
Her west	who, being duly sworn according to law, declares that he is
years of age, and a resident of	mat 1
	; and that he is the identical person who was ENEOLLED at Lawrence
	under the name of Hullet Clark,
on the 12 day of a	ugust, , 1844 as a Private , in Co C
4th Res of 1	Here state rank, and company and regiment in the Army, or vessels if in the Navy.)
no the service of the officed states,	(State name of war, Civil or Mexican.) war, and was HONORABLY DISCHARGED
at FLEW JELLACULO	day of June, on the day of June, 1863.
That he also served	(Here give a complete statement of all other services, if any.)
	military or naval service of the United States otherwise than as stated above. That his personal
KI A	ollows: Height, 5 feet 81 inches; complexion, Light; color of
was born Muy 22	hair diffit; that his occupation was a Mountain that he
was born 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1843, at Hally Conada
That his savoral places of reci	idence since leaving the service have been as follows: Ally P2 5/364
Corper huss	
	(State date of each change, as nearly as possible.)
	971607
	certificate No. 971852. That he has applied for pension under original
No That he makes this declaration	on for the purpose of being placed on the pension roll of the United States under the provisions of
, , , , , , , , , , , , , , , , , , ,	11-0 h 1 D. A. D. J.
That his post-office address is	ate OL
m 0 2,	Extractly Supply Hope of Black
Attest: (1) 4 0 M	(Claimant's signature in full.)
(2)	Chief 106
	worn to before me this day of , A. D. 191 2 and I hereby artify that the contents of the above declaration were fully made known and explained to the
	opplicant before gearing, including the words
	rased, and the with Sadded
	and that Labave no Anterest, direct or indirect, in the prosecution of this claim.
	19!2 How of How hut lis
	(Signature,)

IF A PENSIONER, DO NOT FAIL TO GIVE CERTIFICATE NUMBER.