

I hereby Certify, that Edward Goodchild and Isabella Webb were joined in Marriage

by me, in accordance with the Laws of the State of New York, in the City of Brooklyn, this 21st day of May 1885

DEPARTMENT OF HEALTH,
OFFICE OF REGISTER.

Attest: W. DeLulick

Witnesses: James H. Goodchild Official Station, Minister of the Gospel
Lizzie J. James Residence Brooklyn

All the following blanks are required to be filled.

OF THE GROOM:
Name, Edward Goodchild
Residence, 31 Hamilton St. N.Y. City
Age, 27 Color, _____
No. of Marriage, * First
Occupation, Fireman
Place of Birth, New York City
Father's Name, Edw. Goodchild
Mother's Maiden Name, Elija Hagerty

OF THE BRIDE:
Name, Isabella Webb
Maiden Name, _____
if a Widow, _____
Residence, 347 Prop. av. Brooklyn
Age, 28 Color, _____
No. of Marriage, * First
Place of Birth, New York City
Father's Name, Henry Webb
Mother's Maiden Name, Elija Beamish

We, the Groom and Bride named in the above certificate, hereby certify that the information given is correct to the best of our knowledge and belief.

Edward Goodchild Groom.
Isabella Webb Bride.

*On this line state whether 1st, 2d, 3d, etc., Marriage.