

COPY B
FOR BUREAU OF VITAL
RECORDS AND HEALTH
STATISTICS

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF HEALTH — BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
MARRIAGE RETURN

STATE
FILE
NO.

70 014294

4328

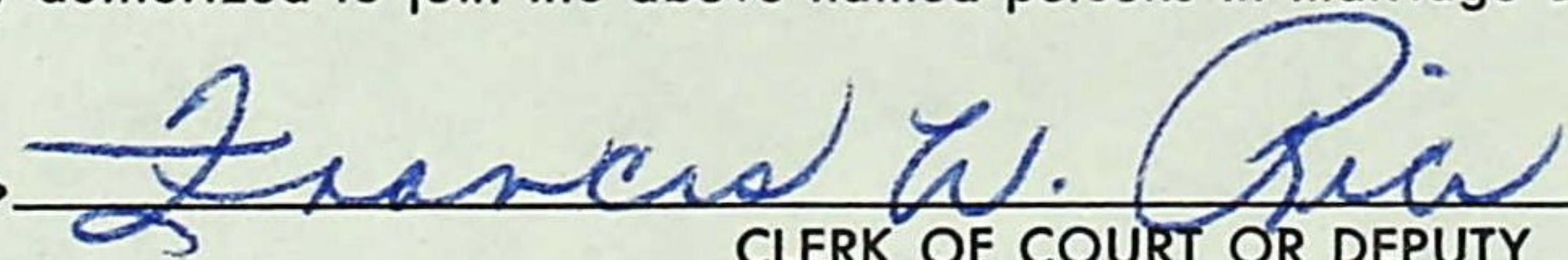
4328

CITY OR COUNTY XXXXXX Richmond		NAME OF COURT Hustings		CLERK'S NUMBER 4328	
1. FULL NAME OF GROOM (first) (middle) (last) James Marshall Zattiero, Jr.					
2. AGE # 29 30 Years		3. DATE OF BIRTH (month) (day) (year) # July 20, 1939		4. PLACE OF BIRTH (state or foreign country) Hampton, Va.	
5. RACE (white, negro, etc.) White		6. SINGLE, WIDOWED, OR DIVORCED (specify) Divorced		7. NUMBER OF THIS MARRIAGE (first, second, etc.) second	
GROOM	8. EDUCATION-SPECIFY HIGHEST GRADE COMPLETED elementary 0, 1, 2 to 8 high school 1, 2, 3 or 4 college 1 to 4 or 5 + 4		9a. USUAL RESIDENCE: STREET ADDRESS OR RT. NUMBER 3904 Seminary Ave.		
	9b. CITY OR TOWN OF RESIDENCE Richmond		9c. COUNTY (if independent city, leave blank) Richmond		9d. STATE (OR FOREIGN COUNTRY) Va.
	10. NAME OF FATHER James M. Zattiero		11. FULL MAIDEN NAME OF MOTHER Maxine Harper		
BRIDE	12. PRESENT NAME OF BRIDE (first) (middle) (last) Noely Pulido-Plazas			MAIDEN SURNAME (if different)	
	13. AGE 22 Years		14. DATE OF BIRTH (month) (day) (year) Oct. 23, 1947		15. PLACE OF BIRTH (state or foreign country) South America
	16. RACE (white, negro, etc.) White		17. SINGLE, WIDOWED, OR DIVORCED (specify) Single		18. NUMBER OF THIS MARRIAGE (first, second, etc.) first
	19. EDUCATION-SPECIFY HIGHEST GRADE COMPLETED elementary 0, 1, 2 to 8 high school 1, 2, 3 or 4 college 1 to 4 or 5 + 4		20a. USUAL RESIDENCE: STREET ADDRESS OR RT. NUMBER 4027 McArthur Ave.		
	20b. CITY OR TOWN OF RESIDENCE Richmond		20c. COUNTY (if independent city, leave blank) Richmond		20d. STATE (OR FOREIGN COUNTRY) Va.
21. NAME OF FATHER Alcides Pulido		22. FULL MAIDEN NAME OF MOTHER Valentina Plazas Cuenca			

MARRIAGE LICENSE

23. TO ANY PERSON LICENSED TO PERFORM MARRIAGES:

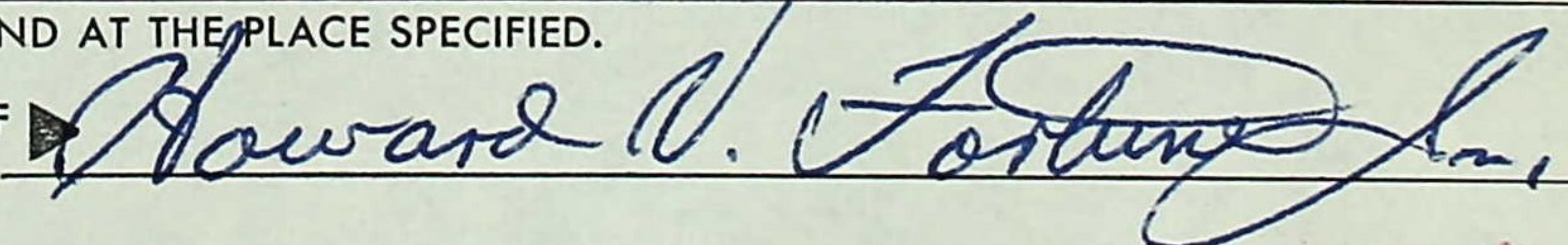
You are hereby authorized to join the above named persons in marriage under procedures outlined in the statutes of the Commonwealth of Virginia.

SIGNATURE  DATE SIGNED **May 12, 1970**
CLERK OF COURT OR DEPUTY LICENSE EXPIRES SIXTY DAYS AFTER ABOVE DATE

MARRIAGE CERTIFICATE

24. DATE OF MARRIAGE (month) (day) (year) May 12th, 1970	25. PLACE OF MARRIAGE (county or independent city) Richmond, VIRGINIA 222
26. TYPE OF CEREMONY (civil or religious--specify) Civil	IF RELIGIOUS CEREMONY, NAME OF DENOMINATION OR ORDER

27. I CERTIFY THAT I JOINED THE ABOVE NAMED PERSONS IN MARRIAGE ON THE DATE AND AT THE PLACE SPECIFIED.

Item 2 completed by query. 6-24-70 dm
SIGNATURE OF OFFICIANT 
BONDED IN **Richmond,** YEAR OF BOND **1970** TITLE OF OFFICIANT **Court Appointed** **00**
ADDRESS OF OFFICIANT **City Hall** **Richmond, Va.**
(street or route number) (city or town) (state)

Margin reserved for binding. This is a permanent record. Please use black ribbon in typewriter or dark unfading ink.

TO OFFICIANT:
Complete and sign certificates on both copies.

Return both copies within five days to Clerk of Court issuing license.

Section 32-353.34,
Code of Virginia.