

**COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF HEALTH-DIVISION OF VITAL RECORDS  
MARRIAGE RETURN**

STATE  
FILE  
NO.

**88-045642**

CITY OR COUNTY OF **Newport News**

NAME OF COURT **Circuit**

CLERK'S NUMBER **376**

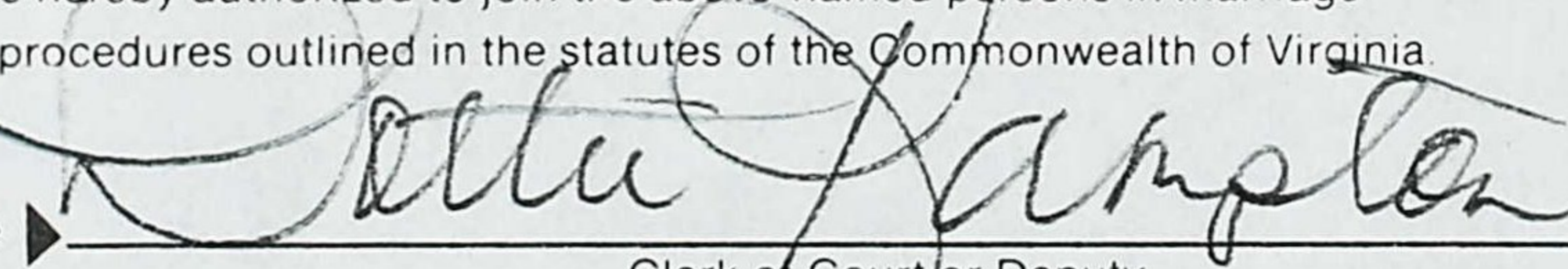
GROOM	1. FULL NAME OF GROOM <b>Robert</b> <sup>(first)</sup> <b>Francis</b> <sup>(middle)</sup> <b>Gardner</b> <sup>(last)</sup>		
	2. AGE <b>19</b> Years	3. DATE OF BIRTH (Month, Day, Year) <b>2-15-69</b>	4. PLACE OF BIRTH (state or foreign country) <b>Colorado</b>
	5. RACE <b>White</b>	6. NUMBER OF THIS MARRIAGE <sup>(first, second, etc.)</sup> <b>1st</b>	7a. MARITAL STATUS (If previously married) WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/>
	8. EDUCATION <i>(Specify only highest grade completed)</i> Elementary or Secondary <b>12</b> <sup>(0-12)</sup> College <sup>(1-4 or 5+)</sup>	9a. USUAL RESIDENCE: STREET ADDRESS OR RT. NUMBER <b>124 Valirey Dr.</b>	
	9b. CITY OR TOWN OF RESIDENCE <b>Hampton</b>	9c. COUNTY (if independent city, leave blank)	9d. STATE (OR FOREIGN COUNTRY) <b>Va.</b>
	10. NAME OF FATHER <b>Ronald Gary Gardner</b>		11. FULL MAIDEN NAME OF MOTHER <b>Judith Catherine Scovel</b>

BRIDE	12. PRESENT NAME OF BRIDE <b>Anne</b> <sup>(first)</sup> <b>Marie</b> <sup>(middle)</sup> <b>Zattiero</b> <sup>(last)</sup>			MAIDEN SURNAME <sup>(if different)</sup>
	13. AGE <b>18</b> Years	14. DATE OF BIRTH (Month, Day, Year) <b>3-4-70</b>	15. PLACE OF BIRTH (state or foreign country) <b>VA.</b>	
	16. RACE <b>White</b>	17. NUMBER OF THIS MARRIAGE <sup>(first, second, etc.)</sup> <b>1st</b>	18a. MARITAL STATUS (If previously married) WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/>	18b. DATE LAST MARRIAGE ENDED
	19. EDUCATION <i>(Specify only highest grade completed)</i> Elementary or Secondary <b>12</b> <sup>(0-12)</sup> College <sup>(1-4 or 5+)</sup>	20a. USUAL RESIDENCE: STREET ADDRESS OR RT. NUMBER <b>5601 Huntington Avenue</b>		
	20b. CITY OR TOWN OF RESIDENCE <b>Newport News</b>	20c. COUNTY (if independent city, leave blank)	20d. STATE (OR FOREIGN COUNTRY) <b>VA.</b>	
	21. NAME OF FATHER <b>William Tony Zattiero</b>		22. FULL MAIDEN NAME OF MOTHER <b>Betty Jo Hux</b>	

23. TO ANY PERSON LICENSED TO PERFORM MARRIAGES. **MARRIAGE LICENSE**

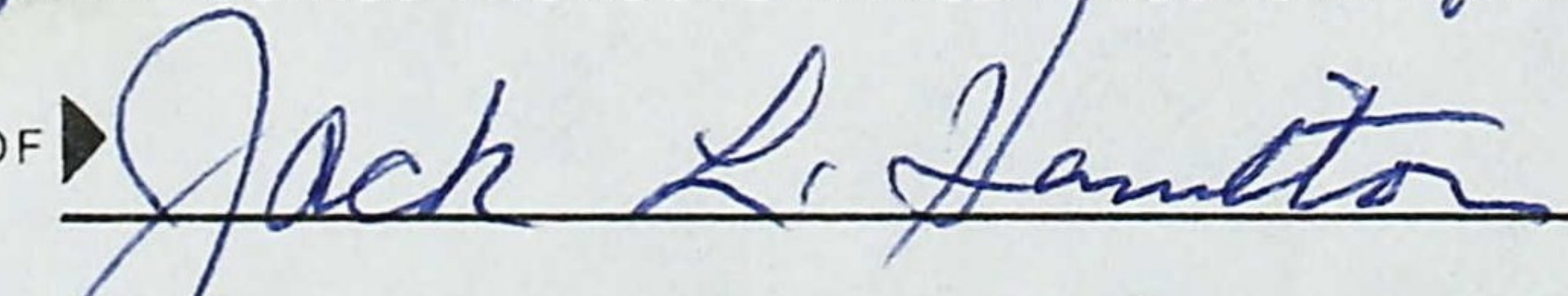
You are hereby authorized to join the above-named persons in marriage under procedures outlined in the statutes of the Commonwealth of Virginia.

Date Issued **August 24th, 1988**  
License Expires Sixty Days After Above Date

Signature  Clerk of Court or Deputy

Date Received by Clerk of Court from Officiant **9-7-88**

**MARRIAGE CERTIFICATE**

24. DATE OF MARRIAGE <sup>(Month, Day, Year)</sup> <b>Sept. 3, 1988</b>	25. PLACE OF MARRIAGE <sup>(county or independent city)</sup> <b>Newport News VIRGINIA</b>	26. TYPE OF CEREMONY CIVIL <input type="checkbox"/> RELIGIOUS <input checked="" type="checkbox"/>
27. I CERTIFY THAT I JOINED THE ABOVE-NAMED PERSONS IN MARRIAGE ON THE DATE AND AT THE PLACE SPECIFIED.		
SIGNATURE OF OFFICIANT 	TITLE OF OFFICIANT <b>PASTOR</b>	
Authorized to perform marriages by the Circuit Court for <b>Newport News</b> (city or county), Virginia, in <b>1953</b> (year of authorization)		
NAME OF OFFICIANT (type or print) <b>JACK L. HAMILTON</b>		
ADDRESS OF OFFICIANT <b>314-61<sup>st</sup> ST. Newport News, VA. 23607</b> (street or route number) (city or town) (state)		

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FOR DIVISION OF VITAL RECORDS  
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2

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

TO OFFICIANT:  
Complete and sign certificates on both copies.  
Return both copies within five days to Clerk of Court issuing license.

Section 32.1-267.  
Code of Virginia

VS3-4/86