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67172

FORM 2.

PROVINCE OF BRITISH COLUMBIA

20-09-217172

CERTIFICATE OF REGISTRATION OF MARRIAGE

32-4

REGISTERED Number.....
(For use of Registrar of Vital Statistics.) 20

City, Town or District.....Municipality.....

BRIDEGROOM

1. Full name ..... Levings (Surname) Arthur Edward (Given name)
2. Occupation..... Blacksmith
3. Bachelor, Widower or Divorced ..... Widower
4. Age 48 5. Religious Denomination ..... Anglican
6. Residence ..... 412 Ker Avenue, Victoria (If in Canada, province, county and Post Office address. If foreign, state country.)
7. Place of birth ..... England (If born in Canada, province, county and Post Office address. If foreign-born—country.)
8. Name of father ..... William Levings
9. Place of birth of father ..... England
10. Maiden name of mother..... Julia Pateman
11. Place of birth of mother ..... England
12. Can bridegroom read?..... Yes ..... Write?..... Yes

BRIDE

13. Full name ..... Moore (Surname) Lilian (Given name)
14. Occupation .....
15. Spinster, Widow or Divorced ..... Widow
16. Age ..... 44 ..... 17. Religious Denomination ..... Anglican
18. Residence..... 935 Delkirk Victoria (If in Canada, province, county and Post Office address. If foreign, state country.)
19. Place of birth ..... England (If born in Canada, province, county and Post Office address. If foreign-born—country.)
20. Name of father ..... Evan Meades
21 Place of birth of father ..... England
22. Maiden name of mother ..... Emma Crease
23. Place of birth of mother ..... England
24. Can bride read?..... Yes ..... Write? ..... Yes

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25. When married..... 18th ..... day of ..... December (Month) ..... 19 20 (Year)
26. Place of marriage ..... St Johns Church Victoria (Name of church or clergyman's residence or location of dwelling house)
27. By license or banns ..... License 69919 (If by license, give number)
28. Signature of { Groom..... Arthur Edward Levings / Bride..... Lilian Moore
29 Witnesses { Name ..... Stephen Levings / Address ..... Victoria / Name ..... Frances Esther Ward / Address ..... Victoria

I certify the above stated particulars are true to the best of my knowledge and belief.

Clergyman ..... H. H. Chadwick
(Signature)
Address ..... Victoria
Religious Denomination ..... Anglican

Registered Number..... Filed at this office ..... day of ..... 19.....

RECEIVED DEC 21 1920

..... District Registrar.

REGISTRAR, B. D. & M. VICTORIA, B. C.

[SEE OTHER SIDE]

NOTE.—This form must not be mutilated. All information asked for is to be given including full Christian and Surnames of all parties, and if for any reason this is impossible, the reason for the omission must be stated.