

RECORD OF MARRIAGE.



of License *April 24* 189*0* Date of Marriage

Name of Male *Bekuda K. Kahakamila* Age *31*

Batchelor.
Widower.
Divorce.

Nationality *Hawaii* Residence *Waima Kohala*

Name of Father *Kahakamila* Name of Mother *Kauir*

Nationality *Hawaii* Nationality *Hawaii*

Place of Birth *Waima Kohala* Residence *Waima Hawaii*

Name of Female *Keala Kalili* Age *17*

Maid.
Widow.
Divorced.

Nationality *Hawaii* Residence *Waima Kohala*

Name of Father *Kalili* Name of Mother *Elikapeka*

Nationality *Hawaii* Nationality *Hawaii*

Place of Birth *Waipio Hamakua* Residence *Waipio Hamakua*

Names of Witnesses *Akama Keliinohola*

Place of Marriage Ceremony performed by *Bekuda K. K.*

Recorded this *26* day of *April* 189*0* at *Waima* Island of *Hawaii*

and sent to office of Board of Health

at *Molokai*, 189*0* (Signed) *Z. Pealimi*

Registrar.