



LACK OF CANONICAL FORM

DETERMINES THE NULLITY OF THE MARRIAGE OF:

_____ and _____

CATHOLIC PARTY:

Name: _____

Address: _____

C/St/Z: _____

Phone: Work (_____) _____ Cell (_____) _____

E-mail: _____

1. CATHOLIC PARTY'S BAPTISM: (Newly dated baptismal record enclosed)

Church of Baptism _____

Address _____

City/St/Z _____

Date of Baptism _____

Officiant _____

* Notations on Baptismal Record: If none, please indicate.

1. _____

2. _____

3. _____

2. **MARRIAGE:** (Copy of marriage license enclosed)

County / State of Marriage _____

Date of Marriage _____

Officiant at Marriage _____

3. **DIVORCE:** (Copy of divorce decree enclosed)

County / State of Divorce _____

Date of Decree _____

Officiating Judge _____

4. _____ Was this marriage ever con-validated in the Catholic Church?

If so, when? _____

Where? _____

5. _____ Was a dispensation from canonical form granted for this marriage?

If so, when? _____

Where? _____

6. _____ Are court ordered child support /alimony payments currently being honored?

7. _____ Have the other demands of the civil divorce settlement been met?

Signature of Priest / Deacon

Date

Parish Name

If you send this form electronically you need to scan your signature; otherwise, sign and send it by regular mail.

Parish Complete Address & Phone

September 2018