

- attachment -

Former/subsequent marriages

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(ver. 2024-1)

Please provide detailed information for *all* former/subsequent marriages of the three Parties except:

- the marriage of the Petitioner with the Respondent;
- the marriage of the Petitioner with the Third Party.

Marriage of... <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Third Party	with	Surname:	Given Name(s):
	<i>Partner's baptismal status:</i> <input type="checkbox"/> unbaptised <input type="checkbox"/> baptized non-Catholic <input type="checkbox"/> Catholic <input type="checkbox"/> invalidly baptised <input type="checkbox"/> unknown <input type="checkbox"/> other:		Baptism: _____ Date: _____ Certificate: p. ____
			Further Annotations:
	Marriage	Date:	Certificate: p. ____
	Divorce	Date:	Certificate: p. ____
	Eccl. Nullity	Date:	Certificate: p. ____

Marriage of... <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Third Party	with	Surname:	Given Name(s):
	<i>Partner's baptismal status:</i> <input type="checkbox"/> unbaptised <input type="checkbox"/> baptized non-Catholic <input type="checkbox"/> Catholic <input type="checkbox"/> invalidly baptised <input type="checkbox"/> unknown <input type="checkbox"/> other:		Baptism: _____ Date: _____ Certificate: p. ____
			Further Annotations:
	Marriage	Date:	Certificate: p. ____
	Divorce	Date:	Certificate: p. ____
	Eccl. Nullity	Date:	Certificate: p. ____

Marriage of... <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Third Party	with	Surname:	Given Name(s):
	<i>Partner's baptismal status:</i> <input type="checkbox"/> unbaptised <input type="checkbox"/> baptized non-Catholic <input type="checkbox"/> Catholic <input type="checkbox"/> invalidly baptised <input type="checkbox"/> unknown <input type="checkbox"/> other:		Baptism: _____ Date: _____ Certificate: p. ____
			Further Annotations:
	Marriage	Date:	Certificate: p. ____
	Divorce	Date:	Certificate: p. ____
	Eccl. Nullity	Date:	Certificate: p. ____