

FORMER BOND OF MARRIAGE Petitioner Questionnaire

	Testimony of: Name: Address: City, State, Zip:	_ _ _
Q. A.	Do you affirm the truth of your answers to the following questions	; ?
Q. A.	Have you ever been baptized in any religion?	
Q. <u>OF `</u>	If so, please give the following information and ENCLOSE A COPYOUR BAPTISM CERTIFICATE WITH YOUR PETITION.	<u>′</u>
A.	Name of Church:	_
	Address:	_
	City, State, Zip:	_
	Date of Baptism:	_
Q. A.	Kindly list ALL your marriages, giving the following information: First Spouse:	
	Name:	_
	Address:	_
	City, State, Zip	_
	Place of Marriage:	
	City, State, Zip Status of Officiant: (Minister, JP, Priest, etc.)	_
	Shouse's Policion at time of marriage.	

Was Spouse baptized?If so:
Date of Baptism:
Name of Church:
Address of Church:
City, State, Zip
Was Spouse ever a Catholic?
ON THE BACK OF THIS FORM, PLEASE GIVE THE ABOVE INFORMATION FOR OTHER SPOUSES YOU HAVE HAD SINCE YOUR FIRST SPOUSE.
Q. Were any of your former spouses married before they married you? If so, please give the following information:
A. Before marrying me, my first spouse was married to: Name:
Address:
City, State, Zip:
Religion
Date of marriage:
Status of Officiant: (Minister, JP, Priest, etc.)
Was this person ever Catholic?If so, please answer the following:
Church of Baptism:
Address of Church:
City, State, Zip:
Date of Baptism :
ON THE BACK OF THIS FORM, PLEASE GIVE THE ABOVE INFORMATION FOR THE PRIOR MARRIAGES OF YOUR OTHER SPOUSES.
Q. How do you know this information about the former marriage/s of your spouse/s? A.
Q. When you married your former spouse/s, was/were his/her prior spouse/s still living? A.
Q. How do you know this? A.

Q.	Do you have anything to add or change in the testimony you have just given?
A.	
Date	<u></u>
	Petitioner's Signature
	Auditor's Signature