



Romanian Catholic Diocese of Canton

Eparchy of St. George

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MARRIAGE FORM B PREVIOUS MARRIAGES

*One of these forms must be completed for **each** prior marriage of*

Name of former spouse: _____

Date of Marriage: _____ City/State/Country of Marriage : _____

Who solemnized the marriage? (Check one) Catholic Priest Other Clergyman Civil Official

How did this marriage cease? _____

If by civil divorce, attach a certified copy of the civil divorce decree.

Is the former spouse dead? Yes No

If "Yes", attach a certified copy of the death certificate

Was this former marriage ever declared null by the Catholic Church? Yes No

If "Yes", please attach the official Decree of Nullity issued by a Catholic Tribunal or Lack of Form Determination by a Catholic Tribunal or Eparchial/Diocesan Chancery Office.

Are you bound by any natural or legal obligations to your former spouse or child(ren)?
 Yes No

If "Yes", are you fulfilling these obligations? Yes No

If "No", please explain why not: _____