ARCHDIOCESE OF BALTIMORE

APPLICATION FOR RADICAL SANATION OF MARRIAGE

Name of Man			Nar	Name of Woman				
Street Address				Street Address				
City	State	Zip Code	City	7		State	Zip Code	
Religion			Rel	gion				
Date of attempted marriage			_					
Reason for the invalidity of t	his marria	ige						
Reason for the request of sar	nation inste	ead of val	idation					
Is the following documentation	on comple	eted or ga	thered?					
Prenuptial investigation: for	both		for husband	l only	for	wife only _		
Baptismal certificates: for	both		for husband	l only	for	wife only _		
Proof of freedom to marry if	deemed n	ecessary:						
for both		for hus	band only _		for wife on	aly		
Are you certain that the cons married life? If so, how are		_			-	-		
Has the Catholic party promi		•		•		•		
Explain if necessary								
I hereby recommend that o	ı radical	sanation	of the mari	riage of the	e above par	ties be grai	nted.	
Signature of Priest or Deacon	n		Na Na	me of Parisl	h		Seal	
Date				dress				