

APPLICATION FOR MARRIAGE LICENSE

PHILIPPINE EMBASSY, MOSCOW				PHILIPPINE EMBASSY, MOSCOW			
Sir/Madam: May I apply for a license to contract marriage with _____ and to this effect, being duly sworn, I hereby depose and say that I have all the necessary qualifications and none of the legal disqualifications to contract the said marriage, and that the following data are true and correct to the best of my knowledge and information:				Sir/Madam: May I apply for a license to contract marriage with _____ and to this effect, being duly sworn, I hereby depose and say that I have all the necessary qualifications and none of the legal disqualifications to contract the said marriage, and that the following data are true and correct to the best of my knowledge and information:			
(First)	(Middle)	(Last)		Name of Applicant	(First)	(Middle)	(Last)
(Day)	(Month)	(Year)	(Age)	Date of Birth/Age	(Day)	(Month)	(Year)
(City/Municipality)		(Province)		Place of Birth	(City/Municipality)		(Province)
				Sex (Male or Female)			
				Residence			
				Religion			
				Civil Status			
				If PREVIOUS MARRIED: How was it Dissolved			
(City/Municipality)		(Province)		Place where Dissolved	(City/Municipality)		(Province)
(Day)	(Month)	(Year)		Date when Dissolved	(Day)	(Month)	(Year)
				Degree of Relationship of Contracting Parties			
(First)	(Middle)	(Last)		Name of Father	(First)	(Middle)	(Last)
				Citizenship			
				Residence			
(First)	(Middle)	(Last)		Name of Mother	(First)	(Middle)	(Last)
				Citizenship			
				Residence			
(First)	(Middle)	(Last)		Person who Gave Consent or Advice	(First)	(Middle)	(Last)
				Relationship			
				Citizenship			
				Residence			
_____ (Signature of Applicant) SUBSCRIBED AND SWORN to before me this ____ day of _____, 20__ in Moscow, Russian Federation. _____ Consul				_____ (Signature of Applicant) SUBSCRIBED AND SWORN to before me this ____ day of _____, 20__ in Moscow, Russian Federation. _____ Consul			

Doc. No. _____
 Page No. _____
 Book No. : _____
 Series of: _____
 Fee Paid: _____
 O.R. No. _____
 Service No. _____