## APPLICATION FOR CERTIFICATE OF LEGAL CAPACITY TO CONTRACT MARRIAGE

Name of Applicant	(First)		(Middle)		(Last)
Date of Birth/Age	(Day)	(Month)	(Ye	ar)	(Age)
Place of Birth	(City/Munic	cipality)		(Province)	
Sex (Male or Female)					
Residence					
Religion					
Civil Status					
If PREVIOUS MARRIED: How was it Dissolved					
Place where Dissolved	(City/Munic	ipality)	(Province)		
Date when Dissolved	(Day)	(Month)	(Year)		
Degree of Relationship of Contracting Parties					
Name of Father	(First)	(Middle)	(Last)		
Citizenship					
Residence					
Name of Mother	(First)	(Middle)	(Last)		
Citizenship					
Residence					
Person who Gave Consent or Advice	(First)	(Middle)	(Last)		
Relationship					
Citizenship					
Residence					
(Signature of Applicant)  SUBSCRIBED AND SWORN to before me this day of, <u>20</u> in Phnom Penh, Cambodia. Affiant exhibited to me his/her Passport No issued at on					
FRANCES LOUISSA C. CLEOFAS Vice Consul					

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