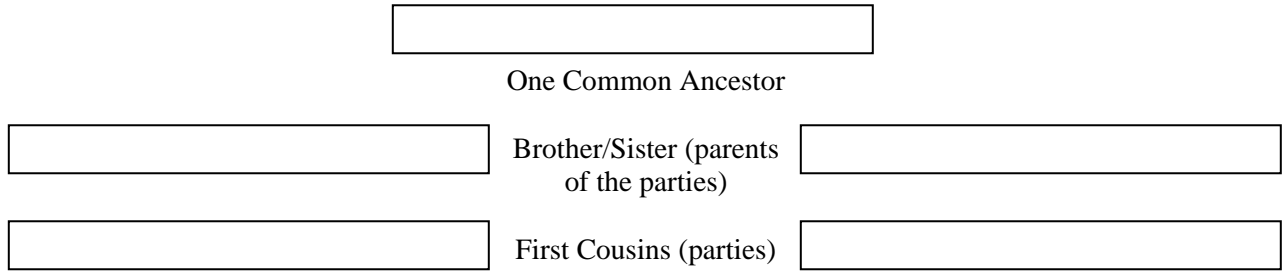


ARCHDIOCESE OF LOS ANGELES
OFFICE OF THE VICAR FOR CANONICAL SERVICES
 3424 Wilshire Boulevard
 Los Angeles, CA 90010-2241
 Tel.: (213) 637-7888
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PETITION FOR DISPENSATION FROM CONSANGUINITY

| Groom | Bride |
|-----------------|-----------------|
| Name: _____ | Name: _____ |
| Religion: _____ | Religion: _____ |

Most Reverend Archbishop:
 I hereby request, on behalf of the Catholic party/parties named above, the **Dispensation from the Impediment of Consanguinity** in accordance with canon 1091 of the Code of Canon Law.
 The following family tree diagrams the degree of relationship:



I have discussed with the parties the possible complications and difficulties which a marriage within close degrees of kinship may pose for intra-family relationships. They have duly considered these, as well as the genetic concerns, which have been explained to them by a qualified physician. In submitting this petition, I am assured that there would be no scandal, should this dispensation be granted.

† Attached is the required letter signed by the parties' physician.

| | | |
|---|-----------|----------|
| Signature of Priest/Deacon/Parish Minister | Parish | |
| Print Name of Priest/Deacon/Parish Minister | Address | |
| Date | Telephone | City/Zip |

By virtue of the faculties granted in accordance with Canons 85, 87 and 1078, §1 of the Code of Canon Law, I hereby grant the requested Dispensation from the Impediment of Consanguinity.

By: _____ Date: _____
 Archbishop of Los Angeles/Vicar/Delegate