## (Rev. 12/2015) DIOCESE OF BIRMINGHAM IN ALABAMA PETITION FOR LIGAMEN

(Please print or type the following information)

(Petitioner)	(Respondent)	(Co-Respondent) First Spouse
I, Diocese of Birmingham my marriage to the Re ground of the diriment this Petition, I submi	spondent, t impediment of Ligam	ion the Tribunal of the mation of the nullity of , on the en. In connection with ement.
SECTION I. THE MARRI THE RESPONDENT	IAGE IN QUESTION BETW	VEEN THE PETITIONER AND
A. General Info	ormation On The Petiti	oner:
Full Legal Name:		
Maiden Name:	First Midd	lle Last
Address: Street	City	State Zip
Telephone number:	(Home)	(Cell)
	ear Mon	-
B. Baptismal Ir	at the Time of Marria	
Date of Baptism:	Year Mont	ch Day
Religion: (Please check)		
Name and Street Addr	ress of Church of Bapt	ism
City	State	Zip
Present Religion:		

# C. <u>General Information On The Respondent</u>:

Full Legal Name:		
Last	First	Middle
Maiden Name:		
Address:		
Street City	State	Zip
Telephone number: (Home)	(Cell)	
Birth date:Year	Month	
IEal	MOITCH	Day
Age of the Respondent at the Tim Petitioner:	ne of Marriage to	the
D. <u>Baptismal Information of th</u>	ne Respondent	
Date of Baptism:		
Year	Month	Day
	Catholic K	rch of
Name and Street Address of Chur	cch of Baptism	
City	State	Zip
-		Ť
Present Religion:		
E. Concerning The Marriage Of	The Petitioner to	o Respondent
Date of marriage:		
Year	Month	Day
(Please check) Christ Roman Ca Eastern Orthodos Other Re	Catholic K	)

Name of	Church	or	Place	of	Marriage	
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# Street Address of the Church or Place of Marriage

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('¬	+ 77
	LV

State

Zip

Name of the Official Witness - (Priest, Clergy, Civil Official)

Was the Co-Respondent (First Spouse) of the Respondent living at the time you married the respondent? \_\_\_\_\_ If no, please indicate the date and place of death. \_\_\_\_\_\_

Number of Children of the Marriage:

Year

Civil Divorce:

Month

Day

City or County State

#### Concerning The Co-Respondent (First Spouse) of The F. Respondent

Full Legal Name:			
Last		First	Middle
Maiden Name:			
Address:			
Street	City	State	Zip
Telephone number: (Home)		(Work)	
Birth date:			
Year	Month	n D	ay

Age of the Co-Respondent (First Spouse) of the Respondent at the time of Co-Respondent's (First Spouse) marriage to the Respondent: \_\_\_\_\_

#### Baptismal Information of the Co-Respondent (First G. Spouse) of the Respondent

Date of Baptism:

Religion: (Please check)	Chr Roma East Ortl	testant (Bapti ist, Methodist an Catholic tern Catholic nodox Baptized		
Name and Stre	eet Address o:	f Church of Bar	otism	
City		State	Zip	
Present Religi	on:			
Responden	t (First Spou	age of Respo se) of the Resp		ne Co-
Date of marria	Year	Month		Day
Type of Ceremo (please check)	Ch Roma East Ortl Othe Civi	testant (Bapti rist, Methodis an Catholic tern Catholic hodox er Religion il/Justice of t Marriage	t, etc.)	
Street Addres	s of the Chur	ch or Place of	Marriage	
201000 1100105			narr rago	
City		State	e Zi	_p
Name of the Of	ficial Witnes	s-Priest, Clero	gy, Civil Offi	cial)
Number of Chil	dren of the Ma	arriage:		
Civil Divorce:	Year	Month	Day	
	ICAL	11011011	Day	
	City or Count	ty Sta	ate	

## SECTION II. ADDITIONAL QUESTIONS TO THE PETITIONER

- A. How many times were you previously married prior to your marriage to the respondent? \_\_\_\_\_
- B. If previously married, please supply the following information which applies to Previous Spouse(s):

1.	
1. Name of Spouse	Date of Marriage
Place of Marriage	Name and Title of Officiant
Date of Civil Divorce	Place of Civil Divorce
Present Name	Present Address
	Place of Death
2. Name of Spouse	Date of Marriage
Place of Marriage	Name and Title of Officiant
Date of Civil Divorce	Place of Civil Divorce
Present Name	Present Address
Date of Death	Place of Death
3. Name of Spouse	Date of Marriage
Place of Marriage	Name and Title of Officiant
Date of Civil Divorce	Place of Civil Divorce
Present Name	Present Address
Date of Death	Place of Death

Are you aware of any other marriages of the Respondent С. besides the marriage to the Co-Respondent (First Spouse) already covered in SECTION I. paragraphs F, G, and H above.

If so, please supply the following information which applies to Previous Spouse(s) of the Respondent:

1.		
	Name of Spouse	Date of Marriage
	Place of Marriage	Name and Title of Officiant
	Date of Civil Divorce	Place of Civil Divorce
	Present Name	Present Address
2	Date of Death	Place of Death
	Name of Spouse	Date of Marriage
	Place of Marriage	Name and Title of Officiant
	Date of Civil Divorce	Place of Civil Divorce
	Present Name	Present Address
	Date of Death	Place of Death

If you are planning another marriage (or convalidation) D. in the Catholic Church, please give the name of the party whom you are planning to marry as well as that person's baptismal status, previous marital status, information about death or annulments of his/her previous spouse, etc. If this is to be a convalidation, what was the date of your civil attempt at marriage?

The Petitioner, \_\_\_\_\_, submits the following **original documents** in support of the above statements. (Check the following)

- Certified copy of the Marriage License APPLICATION (also called Marriage License Record) between myself and the Respondent. (NOTE: Certificate of Marriage may be on this form. If so, do not need a separate Certificate) THIS IS A REQUIRED DOCUMENT. IT SHOULD TELL US THE NUMBER OF MARRIAGES FOR BOTH PARTIES. If the marriage took place in Alabama, you may obtain this document at any Health Department. Ask for Marriage License Record. They will print it out on site.
- Certificate of marriage between myself and Respondent (not the license). See above.
- Certified copy of the <u>Decree</u> of divorce or dissolution between myself and the Respondent (not the petition or separation agreement). If the divorce took place in Alabama, you may obtain A Divorce Certificate at any Health Department.
- Certified copy of the Marriage License APPLICATION (also called Marriage License Record) between the Respondent and Co-Respondent (First Spouse). (NOTE: Certificate of Marriage may be on this form. If so, do not need a separate Certificate) THIS IS A REQUIRED DOCUMENT. IT SHOULD TELL US THE NUMBER OF MARRIAGES FOR BOTH PARTIES. THE NUMBER OF MARRIAGES ON THIS FORM SHOULD BE "O" OR "FIRST" FOR BOTH PARIES IN THIS MARRIAGE.
- Certificate of marriage between Respondent and Co-Respondent (not the license). See above.
- Certified copy of the decree of divorce or dissolution between Respondent and Co-Respondent (not the petition or the separation agreement). If the divorce took place in Alabama, you may obtain A Divorce Certificate at any Health Department.
- Baptismal Certificate of <u>any</u> Catholic parties.
- \_\_\_\_ FEE: \$100.00. (\$50.00 for companion case: when a Petitioner has another marriage case.)

SECTION IV. WITNESSES (To be used ONLY if the Respondent and/or the Co-Respondent (First Spouse) cannot be found or will not cooperate or the number of marriages is not listed on the Marriage License Record.)List 2 witnesses. <u>Be sure the witnesses</u> knew either or both Respondent and Co-Respondent.

I PROPOSE THE FOLLOWING WITNESSES WHO HAVE INFORMATION REGARDING THE FACTS:

- OF THE NON-CATHOLIC BAPTISM OF **RESPONDENT** AND **CO-RESPONDENT (FIRST SPOUSE);** 

- OF THE VALIDITY OF THE MARRIAGE BETWEEN **RESPONDENT** AND **CO-RESPONDENT (FIRST SPOUSE);** 

- THAT **CO-RESPONDENT (FIRST SPOUSE)** WAS ALIVE AT THE TIME OF **RESPONDENT'S** MARRIAGE TO THE **PETITIONER**.

A. Witness 1

Full Legal Name, First, Middle, Last

Street Address

City, State

Home Phone

Cell Phone

Have you asked the Witness to Testify?

B. <u>Witness 2</u>

Full Legal Name, First, Middle, Last

Street Address

City, State

Home Phone

Cell Phone

Have you asked the Witness to Testify?

As God is my witness, I hereby solemnly swear that all statements made by me herein are the truth, the whole truth and nothing but the truth, to the best of my knowledge and belief.

Signature of Petitioner

Signed and sworn to before me, the undersigned this day of

\_\_\_\_\_20\_\_\_\_

at\_\_\_\_\_(Parish)

(Address, City & State)

Signature of Cleric, Pastoral Associate, Advocate, or Ecclesiastical Notary