

TRIBUNAL

Diocese of Stockton

212 N. San Joaquin Street, Stockton, CA 95202-2409
209-466-0636 Fax 209-464-2617
<http://stocktondiocese.org/>

Prot. No. _____

PETITION FOR DECLARATION OF MARRIAGE NULLITY

PLEASE PROVIDE THE FOLLOWING INFORMATION. (Please type or print in ink.)

Petitioner (the party petitioning)

Respondent (the former spouse)

Full Name (maiden, if woman)

Full Name (maiden, if woman)

Age at time of marriage	Religion at time of marriage
-------------------------	------------------------------

Age at time of marriage	Religion at time of marriage
-------------------------	------------------------------

MARITAL INFORMATION

DATE OF MARRIAGE _____ OFFICIANT (NAME AND TITLE) _____

PLACE OF MARRIAGE (CHURCH/COURTHOUSE/RESIDENCE) _____

STREET ADDRESS _____

CITY / STATE / ZIP / COUNTY _____

IF EITHER Party is Catholic AND the Marriage was CELEBRATED in the Catholic Church at some point in time, please answer the questions in this box.

Date of Celebration _____ Catholic Church _____

Address _____ City _____ State _____ Zip _____

Age of the Petitioner at the time of the Celebration _____ Religion of the Petitioner at that time: _____

Age of the Respondent at the time of the Celebration _____ Religion of the Respondent at that time: _____

HISTORY OF RELATIONSHIP

DATE OF INITIAL MEETING _____ DATE OF FIRST DATE _____

DATE OF MARRIAGE PROPOSAL _____ DATE OF FORMAL ENGAGEMENT _____

NAMES AND BIRTH DATES (OR ADOPTION DATES) OF CHILDREN _____

DATES OF SEPARATION(S) _____

FILING DATE OF DIVORCE _____ COUNTY _____ STATE _____ CASE NUMBER _____

If the petition is jointly filed, the petitioner and respondent must read/sign below:

I, the undersigned petitioner/respondent, party to this marriage, request a declaration of invalidity of this marriage. I contend that this marriage is invalid under church law (1983 Code of Canon Law) on the basis of:

- incapacity to give consent to marriage (canon 1095);
- defective consent or a lack of knowledge concerning marriage itself or the other party (canons 1096-1098);
- lack of freedom to give consent to marriage or lack of the intention to consent to marriage (canons 1101-1103).

I swear to the truthfulness of all information I have given. I pledge not to discuss with the witnesses or my former spouse the facts of this case. I understand that all information submitted will become solely the property of the Tribunal of the Diocese of Stockton and that these proceedings are for Church purposes only and have no civil effect whatsoever.

Signature of petitioner _____ Date _____

Signature of respondent _____ Date _____

FOR TRIBUNAL USE ONLY COMPETENCE: CANON 1672 1 2 3

PETITIONER (the party petitioning)

Current Legal Name: LAST _____ FIRST _____ MIDDLE _____
Maiden name if woman: _____ PRESENT RELIGION _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE (H) _____ (W) _____ EXT. _____ (CELL) _____
EMAIL _____
OCCUPATION: _____ PLACE OF EMPLOYMENT _____
DATE OF BIRTH _____ CITY OF BIRTH _____ STATE OF BIRTH _____
FATHER'S FULL NAME AND RELIGION _____
MOTHER'S FULL NAME AND RELIGION _____ MAIDEN NAME _____
IF DECEASED, DATES OF DEATH OF PARENTS ___ Father: ____/____/____ ___ Mother: ____/____/____

WERE YOU BAPTIZED? ___ YES ___ NO DATE _____ AGE _____ DENOMINATION _____
CHURCH NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
IF NON-CATHOLIC BAPTISM, DID YOU MAKE A PROFESSION OF FAITH IN THE CATHOLIC CHURCH? ___ YES ___ NO DATE _____
CHURCH NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

Please list in chronological order ALL of the marriages that you have entered, including "common law".

NAME OF SPOUSE	DATE	PLACE	DATE OF DIVORCE, DISSOLUTION, OR DEATH OF SPOUSE
1 st _____	_____	_____	_____
2 nd _____	_____	_____	_____
3 rd _____	_____	_____	_____

ARE YOU INVOLVED IN RCIA? ___ YES ___ NO IS YOUR CURRENT/INTENDED SPOUSE INVOLVED IN RCIA? ___ YES ___ NO ___ N/A
Has your current/intended spouse been previously married? YES ___ NO ___
If yes, has he/she applied for a declaration of invalidity? _____ If yes, where? _____

DOCUMENTS SUBMITTED: Must be originals or certified documents.

- () Original petition including the questionnaire used and petitioner's testimony (copy to be retained by the petitioner)
- () Witness List
- () Current (dated within six months) Baptismal certificates for Catholic parties
- () Civil license and certificate of marriage from county where wedding occurred
- () Church certificate of marriage from parish where wedding occurred
- () Certified final divorce decree (judgment entry)
- () Other (change of name, restraining orders, police reports, etc.)
- () Cover Letter submitted by Tribunal Aide

Signature of Priest/Deacon/Tribunal Aide Date
Print name: _____
Print parish name: _____

RESPONDENT (the former spouse)

Current Legal Name: LAST _____ FIRST _____ MIDDLE _____
Maiden name if woman: _____ PRESENT RELIGION _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE (H) _____ (W) _____ EXT. _____ (CELL) _____
EMAIL _____
OCCUPATION: _____ PLACE OF EMPLOYMENT _____
DATE OF BIRTH _____ CITY OF BIRTH _____ STATE OF BIRTH _____
FATHER'S FULL NAME AND RELIGION _____
MOTHER'S FULL NAME AND RELIGION _____ MAIDEN NAME _____
IF DECEASED, DATES OF DEATH OF PARENTS ___ Father: ___/___/___ ___ Mother: ___/___/___

If the complete address is unknown, Respondent Search Form is required. Form available at:

<http://stocktondiocese.org/forms-1>

WAS RESPONDENT BAPTIZED? ___ YES ___ NO DATE _____ AGE _____ DENOMINATION _____
CHURCH NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
IF NON-CATHOLIC BAPTISM, DID RESPONDENT MAKE A PROFESSION OF FAITH IN THE CATHOLIC CHURCH? ___ YES ___ NO DATE _____
CHURCH NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

Please list in chronological order ALL of the marriages that RESPONDENT have entered, including "common law".

NAME OF SPOUSE	DATE	PLACE	DATE OF DIVORCE, DISSOLUTION, OR DEATH OF SPOUSE
1 st _____	_____	_____	_____
2 nd _____	_____	_____	_____
3 rd _____	_____	_____	_____

IS RESPONDENT INVOLVED IN RCIA? ___ YES ___ NO IS YOUR CURRENT/INTENDED SPOUSE INVOLVED IN RCIA? ___ YES ___ NO ___ N/A
Has your current/intended spouse been previously married? YES ___ NO ___
If yes, has he/she applied for a declaration of invalidity? _____ If yes, where? _____

Please do not write in this space – for Tribunal use only

Previous Case: ___ Yes ___ No

Conferring Case(s):

Filing Fee _____

CERTIFICATION OF DOCUMENTS:

- 1. BAPTISMAL CERTIFICATE: ___ PET ___ RESP ___ BOTH
- 2. MARRIAGE CERTIFICATE: ___ CIVIL ___ CHURCH
- 3. DIVORCE DECREE
- 4. PRE-NUPTIAL FILE
- 5. OTHER _____

Diocese of Marriage: STKN _____
Diocese of Petitioner: STKN _____
Diocese of Respondent: STKN _____

NOTARY _____ DATE _____