



CATHOLIC DIOCESE OF KALAMAZOO

Office of the Tribunal

215 N. Westnedge Street, Kalamazoo MI 49007-3760; 269-903-0215

LIST OF COOPERATIVE WITNESSES

Before submitting this list, please contact these witnesses so they are willing to testify. Please provide their current, accurate and complete addresses, including the zip code. Unless the judge instructs you otherwise, do not list children from this marriage, or your former spouse, or your intended fiancé(e), or your current civil spouse as witnesses. If an address is partial or wrong or outdated, or the co-operation of a witness has not been obtained, your case and the cases of others are delayed. Please be diligent so the tribunal may assist you.

Send this list with the petition to the tribunal, but keep a copy for your own records.

(The respondent may use a blank copy of this form to name witnesses if supporting or consenting to this petition.)

1.

Mr., Mrs., Ms., Rev., and full name

street address (apartment no., postal box etc.)

city, state, zip code

relationship? length of time known?

2.

Mr., Mrs., Ms., Rev., and full name

street address (apartment no., postal box etc.)

city, state, zip code

relationship? length of time known?

3.

Mr., Mrs., Ms., Rev., and full name

street address (apartment no., postal box etc.)

city, state, zip code

relationship? length of time known?

4.

Mr., Mrs., Ms., Rev., and full name

street address (apartment no., postal box etc.)

city, state, zip code

relationship? length of time known?

5.

Mr., Mrs., Ms., Rev., and full name

street address (apartment no., postal box etc.)

city, state, zip code

relationship? length of time known?

6.

Mr., Mrs., Ms., Rev., and full name

street address (apartment no., postal box etc.)

city, state, zip code

relationship? length of time known?

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