



No. \_\_\_\_\_

# Diocese of Cleveland

1404 East Ninth Street, Seventh Floor, Cleveland, Ohio 44114-2555  
216-696-6525; 1-800-869-6525 (Ohio only); 1-800-676-4431 (outside Ohio); ext. 4000

## PETITION FOR DECLARATION OF INVALIDITY OF MARRIAGE ON THE GROUNDS OF LIGAMEN (PREVIOUS EXISTING BOND)

### I. Marriage to be declared invalid:

PETITIONER			RESPONDENT		
_____	_____	_____	_____	_____	_____
First	Middle	Last (maiden name if female)	First	Middle	Last (maiden name if female)

### The above named petitioner married the above named respondent

in \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, on \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
City County State Month Day Year

in the presence of \_\_\_\_\_ . \_\_\_ Priest \_\_\_ Civil Officiant \_\_\_ Minister

A divorce was filed in \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
County State Month Day Year Case Number

### II. The Previous Existing Bond: (Third Party)

\_\_\_\_\_ married \_\_\_\_\_ (Third Party)  
First Middle Last (maiden name if female) First Middle Last (maiden name if female)

in \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, on \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
City County State Month Day Year

in the presence of \_\_\_\_\_ . \_\_\_ Priest \_\_\_ Civil Officiant \_\_\_ Minister

A divorce was filed in \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
County State Month Day Year Case Number

### III. The petitioner submits the following documents in support of the above statements:

- \_\_\_ Baptismal Record of the Petitioner
- \_\_\_ Baptismal Record of the Respondent
- \_\_\_ Marriage License Application for the marriage stated in Part I. above.
- \_\_\_ Civil Marriage Record for the marriage stated in Part I. above.
- \_\_\_ Divorce Decree for the marriage stated in Part I. above.
- \_\_\_ Marriage License Application for the marriage stated in Part II. above.
- \_\_\_ Civil Marriage Record for the marriage stated in Part II. above.
- \_\_\_ Divorce Decree for the marriage stated in Part II. above.
- \_\_\_ Other documents, Please indicate: \_\_\_\_\_.

**IV. CONCERNING THE PETITIONER**

1. Name of Petitioner: \_\_\_\_\_ ( \_\_\_\_\_ )  
First Middle Current Last Name Maiden Name

2. Living at: \_\_\_\_\_ , \_\_\_\_\_ .  
Street Address City State Zip

3. Date of Birth : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Place of birth: \_\_\_\_\_ , \_\_\_\_\_  
Month Day Year City State

4. Present Religion: \_\_\_\_\_ Phone Number: ( \_\_\_\_\_ ) - \_\_\_\_\_

5. Dates and places of all baptisms: 

<u>Date</u>	<u>City</u>	<u>Church</u>	<u>Denomination</u>
_____	_____	_____	_____
_____	_____	_____	_____

6. List all persons the petitioner has married beginning with the first marriage:  

<u>Name (Include maiden name if female)</u>	<u>Date</u>	<u>Place</u>
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

7. Name, religion, and previous marital status of your present or intended spouse:  
\_\_\_\_\_

**V. CONCERNING THE RESPONDENT:**

1. Name of Respondent: \_\_\_\_\_ ( \_\_\_\_\_ )  
First Middle Current Last Name Maiden Name

2. Living at : \_\_\_\_\_ , \_\_\_\_\_ .  
Street Address City State Zip

3. Date of Birth : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Place of birth: \_\_\_\_\_ , \_\_\_\_\_  
Month Day Year City State

4. Present Religion: \_\_\_\_\_ Phone Number: ( \_\_\_\_\_ ) - \_\_\_\_\_

5. Dates and places of all baptisms: 

<u>Date</u>	<u>City</u>	<u>Church</u>	<u>Denomination</u>
_____	_____	_____	_____
_____	_____	_____	_____

6. List all persons the respondent has married beginning with the first marriage:  

<u>Name (Include maiden name if female)</u>	<u>Date</u>	<u>Place</u>
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

7. Name and religion of the respondent's current spouse if remarried: \_\_\_\_\_

**VI. CONCERNING THE THIRD PARTY**

Since the validity of the petitioner's marriage to the respondent is being challenged by reason of a previous marriage, it is necessary to provide the information about the third party.

1. Name of Third Party: \_\_\_\_\_ ( \_\_\_\_\_ )  
First Middle Current Last Name Maiden Name

2. Living at : \_\_\_\_\_ , \_\_\_\_\_  
Street Address City State Zip

3. Date of Birth : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Place of birth: \_\_\_\_\_ , \_\_\_\_\_  
Month Day Year City State

4. Present Religion: \_\_\_\_\_

5. Dates and places of all baptisms: Date City Church Denomination  
\_\_\_\_\_  
\_\_\_\_\_

6. List all persons the third party has married beginning with his/her first marriage:

	<u>Name (Include maiden name if female)</u>	<u>Date</u>	<u>Place</u>
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

7. If the Third Party is deceased, provide the place and date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ; \_\_\_\_\_ , \_\_\_\_\_  
Month Day Year City State

I understand that a date for a wedding in the Catholic Church *cannot be given* to me by the pastor or any other parish personnel unless notice is given by the Diocese of Cleveland that I am free to marry in the Catholic Church. **Initials of petitioner** \_\_\_\_\_

I mandate as procurator for the first and all instances \_\_\_\_\_ to serve as my representative with the power of performing all useful and necessary acts before the Tribunal.

**Signature of petitioner** \_\_\_\_\_ Date \_\_\_\_\_

Name of procurator \_\_\_\_\_ Parish \_\_\_\_\_

Address of parish \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ ext. \_\_\_\_\_

**Signature of procurator** \_\_\_\_\_ Date \_\_\_\_\_

**For TRIBUNAL USE Only**

**Certification of Petitioner & Respondent Documents**

- 1. Bapt. Cert: P \_\_\_\_\_ Resp. \_\_\_\_\_
- 2. Marriage Cert. \_\_\_\_\_ 3. MLA \_\_\_\_\_
- 4. Div. Rec. \_\_\_\_\_
- 5. Other \_\_\_\_\_

**Certification of Documents for the marriage to the Third Party**

- 1. Bapt. Cert. \_\_\_\_\_
- 2. Marriage Cert. \_\_\_\_\_ 3. MLA \_\_\_\_\_
- 4. Div. Rec. \_\_\_\_\_
- 5. Other \_\_\_\_\_

**CONFERRING CASES:**

NOTARY \_\_\_\_\_ DATE \_\_\_\_\_