

PETITION for a DECREE of NULLITY
Absence of CANONICAL FORM

NOTE: Please print. Use the maiden name for the woman.

I, (name) _____, was (Please check the correct line):
_____ baptized Catholic,
_____ not a baptized Catholic.

when I married (name) _____. This person was:
_____ baptized Catholic,
_____ not a baptized Catholic.

*I request a DECREE OF NULLITY because of **ABSENCE OF CANONICAL FORM**. I hereby swear that at least one of the parties was baptized Catholic. There was no dispensation (permission) from the Local Ordinary to marry in a ceremony other than the required Catholic ceremony. The marriage was never convalidated in the Catholic Church. I have enclosed:*

- Copy of the Baptismal Certificate of the Catholic Party
- Copy of the Civil Certificate of Marriage issued by the State
- Copy of the final Civil Divorce Decree. *ONLY a copy of the FINAL and ABSOLUTE divorce decree is acceptable*

Please provide the **EXACT** date and location of:

CATHOLIC BAPTISM:

Church:

_____ Date
_____ Name _____ Address

MARRIAGE in question:

Church/courthouse:

_____ Date
_____ Name
_____ Address

DECREE of DIVORCE:

_____ City _____ State _____ Zip Code
_____ Date

Signature of the Petitioner:

_____ Phone # _____
_____ Address _____ City _____ State _____ Zip Code

Present name of FORMER SPOUSE (please print) _____

To be COMPLETED by the AUDITOR

I affirm I have carefully explained the meaning of the above to the petitioner and carefully examined the documents of the Catholic baptism, marriage and civil divorce and will place them in the parish marriage file. I am certain the facts attested to by the petitioner are true. I ask the Archbishop's Delegate to declare the parties free to marry due to ABSENCE of CANONICAL FORM, provided there are no other existing impediments. I have enclosed a \$75 check for the Tribunal processing fee or Credit Card (circle one). MC VISA AMEX DISCOVER

Card #: _____ Expiration Date: _____

Print Name on Card: _____ Signature of Card Holder: _____

Signature of the Auditor: _____ Date: _____

Parish Name

Address

Seal