## ARCHDIOCESE OF BALTIMORE

## METROPOLITAN TRIBUNAL

## **Intention to Petition for Declaration of Nullity**

	etitioner, (full name	:
At (full	address):	
City/Sta	ate/Zip:	/ /
Phone #	ŧ:	Email Address:
		tropolitan Tribunal of the Archdiocese of Baltimore to investigate, according to rch, the canonical validity of my marriage to:
To (Res	pondent):	
At (full	address):	
On (dat	e of wedding):	At (place):
City/Sta	ate/Zip:	/ /
		wledgeable witnesses who are able and willing to provide testimony and
or will s	soon contact each w in my case.	each have information that would be helpful for the Tribunal. I have contacted tness listed to obtain their personal consent to be contacted by the Tribunal as a ase PRINT full names and ADDRESSES of witnesses.)
or will s witness	soon contact each w in my case. ( <b>Pl</b>	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase <b>PRINT full names and ADDRESSES of witnesses.</b> )
or will s witness	soon contact each w in my case. ( <i>Pla</i> Name:	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase PRINT full names and ADDRESSES of witnesses.)
or will s witness	soon contact each w in my case. ( <i>Pl</i> Name: Address:	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase <b>PRINT full names and ADDRESSES of witnesses.</b> )
or will s witness	soon contact each w in my case. ( <i>Pla</i> Name: Address: Phone:	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase PRINT full names and ADDRESSES of witnesses.)
or will s witness	soon contact each w in my case. (Pla Name: Address: Phone: Name:	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase PRINT full names and ADDRESSES of witnesses.)
or will s witness 1. 2.	soon contact each w in my case. (Pla Name: Address: Phone: Name: Address:	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase PRINT full names and ADDRESSES of witnesses.)
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or will s witness	soon contact each w in my case. (Pla Name: Address: Phone: Address: Phone: Phone: Name:	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase PRINT full names and ADDRESSES of witnesses.)  Relationship: Relationship: Relationship:
or will switness 1. 2. 3.	soon contact each w in my case. (Pla Name: Address: Phone: Address: Phone: Phone: Name:	tness listed to obtain their personal consent to be contacted by the Tribunal as a ase PRINT full names and ADDRESSES of witnesses.)  Relationship: Relationship: Relationship:

Please explain in paragraph form, not to exceed one page, why you would consider this marriage to be invalid. As you develop this statement, *please bear in mind that inflammatory and derogatory language involving persons or events will not be accepted.* 

Please know that because of our deep concern for the safety of children and our firm commitment to keep them safe, we are obligated to report to the appropriate authority any and all instances of alleged abuse brought to our attention during the process.