



ARCHDIOCESE OF BALTIMORE

METROPOLITAN TRIBUNAL

PETITION FOR DECLARATION OF NULLITY OF THE MARRIAGE BOND  
MADE TO THE TRIBUNAL OF THE ARCHDIOCESE OF BALTIMORE

I \_\_\_\_\_, with residence at \_\_\_\_\_  
\_\_\_\_\_

Respectfully request the Tribunal of the Archdiocese of Baltimore  
to declare as non-binding based on the ground: LIGAMEN (prior bond)  
the marriage I contracted with \_\_\_\_\_  
on \_\_\_\_\_ at \_\_\_\_\_  
\_\_\_\_\_

My former spouse's mailing address is \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_  
\_\_\_\_\_ Petitioner's signature

Phone number: \_\_\_\_\_

The outline of the facts of the case and the necessary documents to substantiate the same  
are attached.

For Tribunal office use only:

Case was opened on: \_\_\_\_\_

Fee: \$250.00 DATE PAID: \_\_\_\_\_ WILL PAY BY: \_\_\_\_\_



ARCHDIOCESE OF BALTIMORE

METROPOLITAN TRIBUNAL

LIGAMEN

Canon 1085

\_\_\_\_\_

Testimony of \_\_\_\_\_, Petitioner  
OATH ADMINISTERED AND PERSON IDENTIFIED

A. PETITIONER:

1. Your full name \_\_\_\_\_

Maiden name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

2. Date and place of birth \_\_\_\_\_

3. Religion \_\_\_\_\_

Church of Baptism \_\_\_\_\_

Date of Baptism \_\_\_\_\_

4. Father's name and religion \_\_\_\_\_

Mother's maiden name and religion \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

5. Why are you seeking this declaration of nullity? \_\_\_\_\_  
\_\_\_\_\_

B. RESPONDENT:

1. Present full name \_\_\_\_\_

Maiden name \_\_\_\_\_

Address \_\_\_\_\_

2. Date and place of birth \_\_\_\_\_



Was this party still living when you married the Respondent? \_\_\_\_\_

If so, how do you know this? \_\_\_\_\_

**IF MORE THAN ONE PREVIOUS MARRIAGE, LIST BELOW:**

Name of spouse \_\_\_\_\_

Religion \_\_\_\_\_

Date married \_\_\_\_\_

Place \_\_\_\_\_

Date divorced \_\_\_\_\_

Place \_\_\_\_\_

Was \_\_\_\_\_ marriage to \_\_\_\_\_  
the first marriage for both of them? \_\_\_\_\_

How do you know this? \_\_\_\_\_

(List any other previous marriages on separate page.)

E. If you do not believe a Decree of Nullity should be granted in this case, please state your reasons clearly on the reverse side of this page.

**F. TESTIMONY READ BACK**

1. Do you have anything to add, change or omit in your testimony? \_\_\_\_\_

\_\_\_\_\_

2. Do you swear to the truth of the above statements? \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner

SEAL

\_\_\_\_\_  
Auditor

Date: \_\_\_\_\_

Place: \_\_\_\_\_

\_\_\_\_\_