



## THE TRIBUNAL

DIOCESE OF WHEELING-CHARLESTON  
PO BOX 230  
WHEELING, WV 26003

(304) 233-0880

### PETITION FOR LIGAMEN CASE

I, \_\_\_\_\_ residing at  
FULL MAIDEN NAME OF PETITIONER RELIGION

\_\_\_\_\_  
ADDRESS CITY STATE ZIP CODE

humbly petition that my attempted marriage with \_\_\_\_\_,  
FULL MAIDEN NAME OF RESPONDENT

a \_\_\_\_\_, residing at \_\_\_\_\_  
RELIGION ADDRESS

\_\_\_\_\_, be declared null and void from  
CITY STATE ZIP CODE

the beginning on account of the invalidating impediment of Ligamen. This marriage took place

on \_\_\_\_\_ at \_\_\_\_\_ in the presence of  
DATE TOWN, COUNTY AND STATE

\_\_\_\_\_.  
TITLE OF OFFICIAL WITNESS RESPONDENT

was previously married to \_\_\_\_\_ a \_\_\_\_\_ on \_\_\_\_\_  
NAME OF PREVIOUS SPOUSE RELIGION DATE

at \_\_\_\_\_ in the presence of \_\_\_\_\_.  
TOWN, COUNTY AND STATE TITLE OF OFFICIAL WITNESS

### The following necessary documents must be included with this petition:

Certified Copy of the marriage certificate and decree of divorce of the petitioner and respondent.

Certified copy of the marriage certificate and decree of divorce of the respondent and previous spouse.

Present name and address of my former spouse.

PARISH  
SEAL

\_\_\_\_\_  
SIGNATURE OF PETITIONER

\_\_\_\_\_  
SIGNATURE OF ADVOCATE

\_\_\_\_\_  
DATE

## QUESTIONNAIRE FOR LIGAMEN - PETITIONER

1. Do you solemnly swear before God to tell the whole truth in answer to the following? \_\_\_\_\_

2. What was your religion at the time of marriage? \_\_\_\_\_

3. Were you ever baptized, sprinkled or christened? \_\_\_\_\_

Is so, give the date, and the name and location of the church: \_\_\_\_\_

\_\_\_\_\_

4. Date and place of your birth? \_\_\_\_\_

5. Your father's name and address? \_\_\_\_\_

\_\_\_\_\_

6. Your mother's (maiden) name and address? \_\_\_\_\_

\_\_\_\_\_

7. When did you marry? \_\_\_\_\_

8. Where did you marry? \_\_\_\_\_

9. Were you previously married before this marriage? \_\_\_\_\_ If so, give the following for each:

\_\_\_\_\_  
NAME OF PARTY

\_\_\_\_\_  
DATE OF MARRIGE

\_\_\_\_\_  
PLACE OF MARRIAGE

PLEASE LIST ANY ADDITIONAL MARRIAGES ON A SEPARATE SHEET

10. Was your former spouse ever baptized, sprinkled or christened? \_\_\_\_\_

If so, give the date, and the name and location of the church: \_\_\_\_\_

\_\_\_\_\_

11. Did your former spouse go through a marriage ceremony before this marriage with you? \_\_\_\_

If so, give the following information:

\_\_\_\_\_  
NAME OF PARTY

\_\_\_\_\_  
DATE OF MARRIGE

\_\_\_\_\_  
PLACE OF MARRIAGE

12. Is \_\_\_\_\_ one and the same person who contracted marriage  
RESPONDENT

with \_\_\_\_\_ and with you?  
RESPONDENT'S PREVIOUS SPOUSE

13. How do you know? \_\_\_\_\_

14. Was \_\_\_\_\_ living at the time your former spouse  
RESPONDENT'S PREVIOUS SPOUSE

contracted marriage with you?

15. Do you have any other pertinent information or comment? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PETITIONER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF ADVOCATE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME OF PARISH

PARISH  
SEAL