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**LIGAMEN / PRIOR BOND**

**Protocol No: TY# \_\_\_\_\_\_ - 04\_\_\_\_**

 **Case Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* To establish Ligamen or Prior Bond, the prior marriage

 must be proven to be the **first** marriage for **both parties**.

I, Click here to enter text., petition the Tribunal of the Diocese of Tyler for a

declaration of invalidity of my marriage to the Respondent, Click here to enter text.

1. Petitioner Full Name: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Daytime Phone: Click here to enter text.

 E-mail: Click here to enter text.

2. Have you ever been baptized?

Yes / No Click here to enter text.
 In what Religion? Click here to enter text.

3. Were you ever, or now Roman Catholic?

Yes / No Click here to enter text.

4. Please list all your marriages chronologically: (indicate dates of marriage / divorce)

 **1**st to: Click here to enter text.

 Dates: Click here to enter text.

**2**nd to: Click here to enter text.
 Dates: Click here to enter text.

**3**rd to: Click here to enter text.
Dates: Click here to enter text.

**4**th to: Click here to enter text.
Dates: Click here to enter text.

5. Is the Respondent from marriage #\_\_\_\_\_\_ still living?

Yes / No Click here to enter text.

6. Respondent Full Name: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Daytime Phone: Click here to enter text.
 E-mail: Click here to enter text.

7. Was the Respondent baptized: Yes / No Click here to enter text.

In what religion? Click here to enter text.

8. Was the Respondent ever, or now Roman Catholic?

Yes / No Click here to enter text.

9. How do you know this?

Click here to enter text.

10. List all the Respondent’s marriages chronologically: (indicate dates of marriage / divorce)

 **1**st to: Click here to enter text.

 Dates: Click here to enter text.

**2**nd to: Click here to enter text.
 Dates: Click here to enter text.

**3**rd to: Click here to enter text.
Dates: Click here to enter text.

**4**th to: Click here to enter text.
Dates: Click here to enter text.

11. Is the Respondent’s former spouse from marriage # \_\_\_\_\_ living?

Yes / No Click here to enter text.

 Co-Respondent’s Name: Click here to enter text.

 Address: Click here to enter text.

 City/S Click here to enter text.
 Daytime Phone: Click here to enter text.
 E-mail: Click here to enter text.

12. Was this person baptized? Yes / No Click here to enter text.

In what religion? Click here to enter text.

13. Was this person ever, or now Roman Catholic?

Yes / No Click here to enter text.

13. How do you know this?

Click here to enter text.

15. **\*\*** Was this the **first** marriage for both parties in the previous marriage?

Yes / No Click here to enter text.

How do you know this?

Click here to enter text.

16. What is the name of your present or intended spouse?

Click here to enter text.

17. Is your spouse / intended spouse free to marry in the Catholic Church?

Yes / No Click here to enter text.

\* If No, please explain.

Click here to enter text.

\* How many prior marriages does your spouse / intended spouse have?

Click here to enter text.

(\*All prior marriages will need to be addressed by the Tribunal.)

18. Witnesses who have information regarding these facts: (May be the Resp & Co-Resp)

 a) the Respondent and Co-Respondent were not Catholic

 b) the marriage between the Respondent and Co-Respondent

 was the first marriage for both parties

 c) the Co-Respondent was still living while the Respondent was

 married to the Petitioner

**Witness 1**:

Name: Click here to enter text.

Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Daytime Phone: Click here to enter text.

 E-mail: Click here to enter text.

 Relationship: Click here to enter text.

**Witness 2**:

Name: Click here to enter text.

Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Daytime Phone: Click here to enter text.

 E-mail: Click here to enter text.

 Relationship: Click here to enter text.

19. Are the demands of justice, if any, to your former spouse and children being met? Yes / No:

Click here to enter text.

20. Do you solemnly swear that the above statements are true and correct, to the best of your knowledge and belief? Yes / No:

Click here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Click here to enter a date.

Petitioner signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Click here to enter text.

Priest / Deacon signature Place

1. The following documents are to be submitted with this Petition:

 \_\_\_\_ Marriage license & divorce decree for the Petitioner and the Respondent

 \_\_\_\_ Marriage license & divorce decree for the Respondent’s **prior marriage.**

2. Date and **sign** the form in the appropriate places.

3. Include **maiden names** where applicable.

4. The Petitioner should answer every question on this form. Do not leave any questions blank.

 \* If you have questions call 903 266-2172 or 903 266-2140

**LIGAMEN DONATION AGREEMENT**

Canon law requires every Diocese to staff and maintain a Tribunal Office. The Bishop’s Appeal now subsidizes the Tribunal over $100,000 each year to provide for this most important ministry.

The Tribunal Office incurs certain costs in processing petitions. Staff salaries/medical insurance, priest stipends, continuing education, office utilities, equipment/supplies, phone/postage, and other general office maintenance must be paid monthly.

We ask that a $25 filing fee be submitted with every petition.

An additional donation would be greatly appreciated to help defray the Diocesan expenses in maintaining the Tribunal Office.

Please check the appropriate statements below.

\_\_\_\_\_ I have enclosed a **$25** filing fee.

\_\_\_\_\_ I will make a $\_\_\_\_\_\_ donation when my case is completed.

\_\_\_\_\_ I am unable to offer a donation now, but will prayerfully consider a future donation.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Click here to enter a date.

Petitioner signature Date

Make checks payable to the Diocese of Tyler.

Please return your petition with civil documents to:

TYLER DIOCESAN TRIBUNAL

1015 ESE Loop 323

Tyler TX 75701

 *June 2020*