ECCLESIASTICAL PETITION FOR DISPENSATION AND DECREE OF NULLITY

		_, do hereby submit to the Ecclesiastical		
Jurisdiction of The Most Reverend D Catholic Order of the Missionaries of nullity with regards to my marriage to	Mercy, and plead for	or Apostolic Dispensation and finding of		
numey with regards to my marriage to	·			
I submit that the marriage was no	ot valid due to on	e or more of the following reasons:		
(Check space(s) that apply)				
*Lack of Baptism (At the time of the marriage)	HE:	SHE:		
*If one of the parties was not baptized for the lack of baptism? Yes:		arriage, did a bishop grant a dispensation		
*Check here if you do not know if a d	ispensation was grar	nted		
*What type of clergy performed the r (Denomination) (Title) (Indicate if Pr		Minister, etc)		
*Intention Against Children:	HE:	SHE:		
*Intention Against Permanence:	HE:	SHE:		
*Intention Against Fidelity:	HE:	SHE:		
*Force and Fear/Reverential Fear: (Made to marry by force or fear or		SHE:in sin)		
*Defective Convalidation: (No true mutual consent)	HE:	SHE:		
*Substantial Error: (So many lies or falsehoods about the	HE: personhood or chara	SHE:acter to be highly deceitful or fraudulent)		
*Lack of Due Discretion: (Did not really take the marriage series)	HE: ously from the begin			
*Defective Consent: (Did not really consent at the time of 1 simply did not intend it)	HE: marriage due to any 1	SHE: reason; this could be a mental problem or		

*Incapacity to Develop a Community (Could be such a psychological, or of responsibilities were not possible; thi relationship)	therwise emotional de	efectiveness that cog	
Psychic Incapacity Due to:			
*Alcoholism:	HE:	SHE:	
*Drugs: (Could be illicit or abuse of prescribe	HE:ed medication)	SHE:	
*Homosexuality:	HE:	SHE:	
*Mental or emotional illness:	HE:	SHE:	
*Conditions (Medical):	HE:	SHE:	
Provide explanation:			
*Was there adultery during the marri	age? Yes:	No:	
*Who officiated?(P	Priest, Minister, Civil	Official, Other)	
*Is spouse still living? Yes:	No:		
SOLEMN DECLARATION:			
I hereby certify that the above statem	ents are true and accu	rate to the best of n	ny knowledge.
I hereby certify that I have been count I must enter into the sacrament of Hot that I do not blaspheme the Holy Spin Communion at the Wedding Rite. I will continue to do so until and include	ly Matrimony with an rit. This is especially further certify that I h	especially sincere a true if I am to rece ave examined myse	ive Holy lf in this regard and
Date:			
By:			
Name:	(Please Prin	<u> </u>	

Please call our offices at (818) 390-1452 for pricing information.

Once you have the pricing information, attach a copy of your civil divorce decree and your check or money order made out to Archbishop David Cooper, along with the completed petition and mail to:

Archbishop David Cooper 9250 Reseda Blvd. PMB 264 Northridge, CA 91324

You may also pay the fees by credit card. Please fill out the following information:
Credit Card Charge (Fee):
Credit Card Type:
Credit Card Number:
Credit Card Security Code(Location of CVV2)
The CVV2 is a 3- or 4-digit value printed on the back of your credit/debit card or signature strip, but not encoded on the magnetic stripe
Visa, Mastercard & Discover (3 diight) American Express (4 diight) O 0000 00 0000000000 123 The card is broad by a corresponded doubt be used to parch a season to season the card of the season to season the season the season to season the season the season to season the season to season the season to season the season to season the season that sea
Expiration Date:
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	E-mail address (Optional):
Your Co	mplete Mailing Address if not same as billing address above:
	Name
	Street
	City
	State / Zip /
	Telephone Number:
	E-mail address (Optional):

Annulment fees are refundable only if Archbishop David Leon Cooper will not grant the Petition.