Office of the Tribunal

City, State

Diocese of Erie



429 East Grandview Blvd. Post Office Box 10397 Erie, PA 16514-0397

Phone (814) 824-1140

AGREEMENT OF COOPERATION

(To be submitted with completed Petition.)

(10 be submitted with	in completed i etition.)
	nis case, in recognition of the purely religious nature ibunal of the Diocese of Erie in its investigation of myand will abide by the rules of the annulment Agreement.
1. I understand that the Tribunal of the Diocese of E no guarantee that an Affirmative Decision will be rerallegations of nullity of my marriage must be proven witnesses and by authentic ecclesiastical and civil disufficient proofs rests upon me.	by means of the formal testimony of the parties and
psychological professional or other expert witness a information regarding the case to such an expert wit the Tribunal of the Diocese of Erie may wish to examagency from which I obtained counseling or psychological during the course of the marriage being studied. I he	ness as appointed by the Tribunal. I understand that nine information from a counselor, institution or ogical evaluations and/or therapy either before or
3. I understand that at no time in the course of this per or estimated. No guarantee of the completion of	process can a definite date of conclusion be given to my case within a specified time is made.
4. I agree not to make specific plans for a future ma case. Rather, I will wait until a final decision is rende convalidation of an existing civil marriage are made.	
5. I understand that the contents of this investigation to this case and the staff of the Tribunal of the Dioce case or questions proposed to any witness until such	
6. I attest that I am presenting this case in good fait my knowledge and I agree to provide the whole truth	
7. I attest that this marriage has irreparably failed, a	nd that conjugal living cannot be restored. C1675
 Date	Your Signature

Witness to your Signature