



DIOCESE OF
TRENTON

*In Reply Refer to:
Prot. No.*

ADVOCATE APPOINTMENT

I hereby appoint _____ to serve as my
Advocate in the above-titled petition for the church annulment of marriage.

Printed Name of Petitioner/Respondent

Date: _____

Signature of Petitioner/Respondent

Place: _____

ACCEPTANCE OF APPOINTMENT

I, the undersigned, accept appointment as advocate for the person named above, in this petition for the church annulment of marriage.

Printed Name of Priest / Deacon / Advocate

Date: _____

Signature of Priest / Deacon / Advocate

Place: _____

N.B. This or a similar document of appointment and acceptance is necessary for the advocate selected by the respondent to function in this petition for a church annulment in the Tribunal of the Diocese of Trenton.

OFFICE OF THE TRIBUNAL
701 Lawrenceville Road, Post Office Box 5147, Trenton, New Jersey 08638-0147
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