

SUPERIOR COURT OF CALIFORNIA County of Kings 1640 Kings County Drive, Hanford, CA 93230 (559) 582-1010

# ESTABLISHING A FACT OF MARRIAGE PACKET



Online Assistance: <u>www.courts.ca.gov/selfhelp.htm</u> The California Courts Self-Help Center

E-file California: https://www.kings.courts.ca.gov/online-services/online-case-filing

Kings County Superior Court: <u>www.kings.courts.ca.gov</u> Hours of Operation (Except for Court Holidays): Monday – Friday 8:00a.m. to 4:00p.m.

| FORMS INCLUDED IN THIS PACKET  |                                |  |  |  |
|--|--------------------------------|--|--|--|
| Petition to Establish Fact, Time and Place of Marriage Judicial Council Form BMD-002 |                                |  |  |  |
| Declaration in Support of Petition to Establish Fact,                                | Judicial Council Form BMD-002A |  |  |  |
| Time, and Place of Marriage  |                                |  |  |  |
| Order Establishing Fact of Marriage (SAMPLE)   | Form VS122                     |  |  |  |
| Filing Fee:  |                                |  |  |  |
| • Petition to Establish Fact, Time and Place of                                      | \$435.00                       |  |  |  |
| Birth  |                                |  |  |  |
| Court Reporter Fee   | 30.00                          |  |  |  |

Establishing a Fact of Marriage Packet Cover Sheet (Rev. 9/18/2023)

### BMD-002

|   |  |                          | DIND-002    |  |  |
|---|--|--------------------------|-------------|--|--|
|   | BAR NO.:                               | FOR COURT USE ONLY       |             |  |  |
| NAME:   |  |                          |             |  |  |
| FIRM NAME:<br>STREET ADDRESS:   |  |                          |             |  |  |
|   | STATE: ZIP CODE:                       |                          |             |  |  |
| -   | AX NO.:                                |                          |             |  |  |
| E-MAIL ADDRESS:   |  |                          |             |  |  |
| ATTORNEY FOR (name):  |  |                          |             |  |  |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF   |  |                          |             |  |  |
| STREET ADDRESS:   |  |                          |             |  |  |
| MAILING ADDRESS:  |  |                          |             |  |  |
| CITY AND ZIP CODE:  |  |                          |             |  |  |
| BRANCH NAME:  |  |                          |             |  |  |
| IN THE MATTER OF (names):   |  | CASE NUMBER:             |             |  |  |
|   |  |                          |             |  |  |
|   |  | HEARING DATE AND TIME:   | DEPT.:      |  |  |
| PETITION TO ESTABLISH FACT, DATE,   | AND PLACE OF MARRIAGE                  |                          |             |  |  |
|   | Notice to Petitioners                  |                          |             |  |  |
| At or before the court hearing on this petition, you must provide to the court a completed (filled-in) order for the judicial officer to sign. The order must be prepared on a form issued by the California Department of Public Health Vital Records (CDPH Vital Records), the <i>Order Establishing Fact of Marriage</i> (form VS 122). The top portion of that form is the court order. The bottom portion of that form is the marriage certificate you must submit for filing to CDPH Vital Records with a copy of the signed order certified by the clerk of the court. Form VS 122 may be obtained from CDPH Vital Records or from a county recorder or health department. Information about the form, including instructions on how to get it and how to complete and file it with the court and with CDPH Vital Records. is available online at www.cdph.ca.gov/certlic/birthdeathmar/Pages/CorrectingorAmending/VitalRecords.aspx. *Note: This form may help you establish the fact, date, and place of a marriage so you can create a record of the marriage. But the order on this petition or the marriage certificate filed with CDPH Vital Records will not necessarily establish the validity of the marriage for all purposes. Consultation with a California lawyer is recommended before you proceed. 1. a. Petitioner (name each):     is beneficially interested in and entitled under section 103450 of the California Health and Safety Code to an order establishing the fact and the date and place of the persons named in item 2a.     (2) I am one of the persons named in item 2a.     (2) I am related to a person named in item 2a as follows (specify the relationships of all petitioners to that person): |  |                          |             |  |  |
| Continued in Attachment 1b(4).<br>2. Petitioner requests the court to establish the fac   | t, date, and place of the marriage of: | item 1b(1) is selected): |             |  |  |
| a. Names:   | and:                                   |                          |             |  |  |
| b. Date of marriage:  |  |                          |             |  |  |
| c. Place of marriage: City, town, township, or o  | other (identify "other" if known):     |                          |             |  |  |
| (1) County:   | State (U.S.):                          |                          |             |  |  |
|   | Country:                               |                          |             |  |  |
| (2) State or province:  | Country.                               |                          |             |  |  |
|   |  |                          | Page 1 of 2 |  |  |

|                           | DMD-002      |
|---------------------------|--------------|
| IN THE MATTER OF (names): | CASE NUMBER: |
|                           |              |

| 3. | (Check | one | of | the | following): |
|----|--------|-----|----|-----|-------------|
|----|--------|-----|----|-----|-------------|

a. There is no official record of the fact, date, and place of marriage of the persons named in item 2a.

Continued in Attachment 3b.

#### The persons named in item 2a now reside at (street address and city of each person): Name: Address;

|   | County:  | State: |  |
|---|----------|--------|--|
|   | Name:    |        |  |
|   | Address: |        |  |
|   |          |        |  |
|   | County:  | State: |  |
| 5. Petitioner requests that the court make an order determining that the marriage of the persons named in item 2a the date and at the place stated in items 2b and 2c, as shown by the <i>Declaration in Support of Petition to Estable Place of Marriage</i> (form BMD-002A) and attachments, filed herewith, and by other proofs adduced at the hearing |          |        |  |

- 6. Number of pages attached:
- Date:

(TYPE OR PRINT NAME OF ATTORNEY FOR PETITIONER)

(SIGNATURE OF ATTORNEY)

(SIGNATURE OF PETITIONER)

(SIGNATURE OF PETITIONER)

(SIGNATURE OF PETITIONER)

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct, except as to those matters stated on information and belief, and as to those matters, I am informed and believe them to be true.

Date:

(TYPE OR PRINT NAME OF PETITIONER)

Date:

(TYPE OR PRINT NAME OF PETITIONER)

Date:

| TYPE OR PRINT NAME OF PETITIONER) |  |
|-----------------------------------|--|

BMD-002 [Rev. September 1, 2018] PETITION TO ESTABLISH FACT, DATE, AND PLACE OF MARRIAGE

b. A certified copy of the official record of the marriage of the persons named in item 2a cannot be obtained for the following reasons:

#### **BMD-002A**

|  |                  |                        |                  | DWD-002A |
|--|------------------|------------------------|------------------|----------|
| ATTORNEY OR PARTY WITHOUT ATTORNEY:  | STATE BAR NUMBER | R:                     | FOR COURT USE OF | VLY      |
| NAME:  |                  |                        |                  |          |
| FIRM NAME:   |                  |                        |                  |          |
| STREET ADDRESS:  |                  |                        |                  |          |
| CITY:  | STATE:           | ZIP CODE:              |                  |          |
| TELEPHONE NO .:  | FAX NO.:         |                        |                  |          |
| E-MAIL ADDRESS:  |                  |                        |                  |          |
| ATTORNEY FOR (name):   |                  |                        |                  |          |
| SUPERIOR COURT OF CALIFORNIA, COU  | NTY OF           |                        |                  |          |
| STREET ADDRESS:  |                  |                        |                  |          |
| MAILING ADDRESS:   |                  |                        |                  |          |
| CITY AND ZIP CODE:   |                  |                        |                  |          |
| BRANCH NAME:   |                  |                        |                  |          |
| IN THE MATTER OF (names):  |                  |                        | CASE NUMBER:     |          |
| DECLARATION IN SUPPORT OF PETITION TO<br>ESTABLISH FACT, DATE, AND PLACE OF MARRIAGE |                  | HEARING DATE AND TIME: | DEPT.:           |          |

(Name of declarant):

#### declares as follows:

1. I make the statements in this declaration based on my personal knowledge or on the contents of the documents identified in item 5. ("Personal knowledge" of a fact is knowledge that is **not** gained from another person's statements to you about that fact.)

State:

Country:

- 2. a. I am at least 18 years of age.
  - b. I reside at (street address and city):

County:

3. (Names):

were married on (date):

a. City, town, township, or other (identify "other" if known):

b. County: State (U.S.):

- c. State or province:
- 4. Facts showing when and where the persons named in item 3 were married and explaining how I have personal knowledge of those facts \_\_\_\_\_\_ are stated in the space below \_\_\_\_\_\_ are stated in Attachment 4 to this declaration.

at the following place:

and

(If you are relying solely on the contents of the documents identified in item 5, please advise in the space below.)

Page 1 of 2

| IN THE MATTER OF (names): | CASE NUMBER: |
|---------------------------|--------------|
|                           |              |

- 5. Attached are true and correct copies of the following documents (check each box that applies; statements of officiating persons and witnesses must be signed under oath, in an affidavit sworn before a Notary Public or with the following statement just above the signature: "I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct"):
  - a. Marriage license\* dated (date of each):

     \*(A marriage license is required for a valid marriage in California. The procedure described in Health and Safety Code sec. 103450 et seq., cannot establish the validity of a California marriage if no marriage license was obtained.)
     b. Officiating person's statement dated: (date of each):

  - c. Witness statements dated (date of each):
  - d. Other documents dated (describe and give the date of each document):

Continued on Attachment 5d.

6. The marriage of the persons named in item 3, or the date or place of the marriage **is not is** important to a court case or proceeding that is now pending and described below. (If you selected "is," briefly describe the proceeding and provide the case name and number, the name and address of the court where the proceeding is pending, the names of all parties to the proceeding, and the names, addresses, and telephone numbers of their attorneys. Note: A court order made on a petition under Health and Safety Code section 103450, et seq., may not be effective against claims of persons or organizations not given notice of the petition for the order.)

Continued on Attachment 6.

7. Number of pages attached:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

# **ORDER ESTABLISHING FACT OF MARRIAGE**

# In the Superior Court of the State of California

| In and for the County of   | of   |                        |
|--|--|------------------------|
| In the matter of the petition of<br>MARY JANE SMITH  | Number   |                        |
| To establish the fact of marriage of<br>JOHN MICHAEL SMITH and<br>MARY JANE SMITH  | Department                                       |                        |
|  | )to e  | stablish the fact of   |
| The verified petition of MARY JANE SMITH<br>marriage of JOHN MICHAEL SMITH AND MARY JANE SMITH AND MARY | , A.D., 20, and such petition ha                 | having by an order of  |
| court been duly set for hearing on the day of  | , A.D., 20, at the h                             | our of                 |
| o'clock m. of said day; and now on said day said matter coming of court from the evidence introduced that the said   | on regularly for hearing and it appearing to the | e satisfaction of this |
| petitioner herein, is beneficial annuasted in emblishing a record to<br>AND MARY JANE SMITH<br>in that THERE IS NO MARRIA SEALOGID ON TIL.   | fac JOHN MICHA                                   |                        |
| and it appearing that on the <u>15TH</u> day of <u>JUNE</u><br>of <u>JOHN MICHAEL SMITH</u>  | , A.D., 20_09, the marriage, andMARY JANE SMITH  | each to each other,    |
| occurred, and was solemnized at SACRAMENTO   | , in the County of SACRAN                        | IENTO                  |
| State or Country of CALIFORNIA   |  |                        |
| the provisions of law in effect at the time of said marriage, or such record<br>appearing at said hearing to oppose the making of this order;  | ord has been lost or destroyed after having be   | en meu, anu no one     |
| It is therefore ordered, adjudged, and decreed that on the   | day of   | , A.D.,                |
| 20, the marriage, each to each other, of   |  | occurred               |
| at   | , County of                                      |                        |
| or Country of  |  |                        |
| Done in court this day of  | , A.D., 20                                       |                        |
| ▶  | Judge of the Superior Court                      |                        |

Before filing the above order, insert in the certificate form below, as of the date of the marriage, the personal and statistical particulars required for the records of the State Registrar. A certified copy of the above order must be filed with the State Registrar before the order shall become effective. USE BLACK INK ONLY.

## COURT ORDER DELAYED CERTIFICATE OF MARRIAGE STATE OF CALIFORNIA

NO ERASURES, WHITEOUTS, PHOTOCOPIES. OR ALTERATIONS

LEAVE BLANK

LOCAL REGISTRATION NUMBER

|                       | TYPE OR PRINT CL  | EARLY IN BLACK        | INK ONLY - THIS      | FORM B   | ECOMES THE O   | FFICIAL MARRIAGE          | RECORD          |                   |
|-----------------------|---|-----------------------|----------------------|--|--|---------------------------|-----------------|-------------------|
|                       | 1A FIRST NAME   |                       |                      |  | 18. MIDDLE   |                           |                 |                   |
|                       | ИНОГ  |                       |                      |  | MICHAEL  |                           |                 |                   |
|                       | TC CURRENT LAST   |                       |                      |  | 10. LAST NAME AT BIRTH (IF DIFFERENT THAN 10)<br>SMITH |                           |                 |                   |
|                       | 2. DATE OF BIRTH (MM/DD/CCYY)   | 3. STATE/COUNTRY OF B | RTH 4. # PREV MARRIA | GES/SRDP   | 5A, LAST MARRIAG                                       | E/SRDP ENDED BY           |                 | DATE ENDED        |
| Bride<br>DATA         | 07/04/1980  | CA                    | 0                    |  |  | ANNULMENT TERM SRD        | ° []h. M        | M/DD/CCYY)        |
| N                     | 6. ADDRESS  |                       | 7. CITY              |  |  | 8. STATE / COUNTRY        | 13              | ZIP CODE          |
| pers                  | 1234 MAIN STREET  |                       | SACRAMEN             | SACRAMENTO   |  | CA                        | 9               | 5817              |
| Groom Bride           | 10A. MAILING ADDRESS (IF DIFF   | ERENT)                | 108 CITY             |  |  | 10C STATE                 | 10              | D. ZIP CODE       |
|                       | 114 FULL BIRTH NAME OF FATH   | IER/PARENT            | i                    |  |  | 11B. STATE OF BIRTH (IF C | UTSIDE U.S      | ENTER COUNTRY     |
|                       | JAMES MARK SMIT   | Н                     |                      |  |  | CA                        |                 |                   |
|                       | 12A. FULL BIRTH NAME OF MOTH  | HER/PARENT            |                      |  |  | 128 STATE OF BIRTH (IF C  | UTSIDE U.S      | ENTER COUNTRY;    |
|                       | JUDITH JANE JONES   |                       |                      |  |  | CA                        |                 |                   |
|                       | 13A FIRST NAME  |                       |                      | 13B. MIDDLE  |  |                           | ·······         |                   |
|                       | MARY  |                       |                      | JANE   |  |                           |                 |                   |
|                       | 13C CURRENT LAST  |                       |                      |  | LAST LAME A  | T BIR ENT THA             | N 1G)           |                   |
|                       |   |                       |                      |  | B DV N   |                           |                 |                   |
| ٨                     | 14 DATE OF BIRTH (MMOD/CCYY)  | 15.51. TCOU           |                      | GES  | TA LAS IARRIA  | GE/S PENDED BY            |                 | B DATE ENDED      |
| Bride                 | 03/19/1981  | GA                    |                      |  | DEATH DISSO  |                           | P NA            | WILLIAUL ( ) (    |
|                       | 18. ADDRESS   |                       | 19. CITY             | 19. CITY   |  | 20. STATE / COUNTRY       | 21              | ZIP CODE          |
| SECOND PERSON DATA    | 1234 MAIN STREET  |                       | SACRAMENTO           |  | CA   | 9                         | 95817           |                   |
| Gro                   | 22A. MAILING ADDRESS (IF DIFFERENT)   |                       | 22B. CITY            | 228. CITY  |  | 22C STATE                 | 2               | D ZIP CODE        |
| <u> </u>              |   |                       |                      |  |  |                           | -               | -                 |
| :                     | 23A. FULL BIRTH NAME OF FATHER/PARENT   |                       |                      |  |  | 238 STATE OF BIRTH (IF (  | DUTSIDE U.S     | ENTER COUNTRY)    |
|                       | WILLIAM CHARLES BROWN   |                       |                      |  | CA   |                           |                 |                   |
|                       | 24A. FULL BIRTH NAME OF MOTHER/PARENT   |                       |                      | 248, STATE OF BIRTH (IF OUTSIDE U.S., ENTER COUNTRY        |  |                           |                 |                   |
|                       | MARTHA MARIE MILLER   |                       |                      |  | CA   |                           |                 |                   |
|                       | 25. DATE OF MARRIAGE-MM/D   | D/CCYY 26.            | CITY/TOWN OF MARRIA  | Y/TOWN OF MARRIAGE   |  | 27. COUNTY OF MARRIAGE    |                 |                   |
| MARRIAGE              | 6/15/09   | S                     | ACRAMENTO            |  |  | SACRAMENT                 | C               |                   |
| (0                    | NEW MIDDLE AND LAST NAME OF PER<br>28A. FIRST - MUST BE SAME AS                               |                       | 288 MIDDLE           | IZATION OF T   | HE MARRIAGE (IF DIFFE)                                 | ENT THAN 18 AND 1C)       |                 |                   |
| NEW NAMES<br>(IF ANY) |   |                       |                      | -  |  |                           |                 |                   |
| (IF A                 | NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 13A - 12D (IF ANY) FOR USE UPON SOLEMNIZATION OF |                       |                      | 11H, MARRIAGE (IF DIFFERENT THAN 13B AND 13C)<br>29C. LAST |  |                           |                 |                   |
| ž                     | 29A. FIRST - MUST BE SAME AS<br>MARY  | ISA                   | 298. MIDDLE          |  |  | BROWN-SMITH               |                 |                   |
|                       | OFFERED FOR FILING PURSUANT TO ORDER NUMBER   |                       |                      |  |  |                           |                 |                   |
|                       | OF THE SUPERIOR COURT OF THE STATE OF CALIFORNIA IN AND FOR THE COUNTY OF                     |                       |                      |  |  |                           |                 |                   |
| STATE                 | MADE THE DAY OF A.D. 20   |                       |                      |  |  |                           |                 | OF MARRIAGE IN    |
| REGISTRAR             | THE STATE OR COUNTRY OF NO MARRIAGE CERTIFICATE HAS BEEN FOUND ON FILE IN THE OFFICE OF VITA  |                       |                      |  |  |                           | OFFICE OF VITAL |                   |
| USE ONLY              | RECORDS FOR THE ABOVE PARTIES   |                       |                      |  |  |                           |                 |                   |
|                       | 30 OFFICE OF VITAL RECORDS  | 1                     |                      | 31. DATE   | ACCEPTED FOR RE  | GISTRATION                |                 |                   |
|                       |   |                       |                      |  |  |                           |                 |                   |
| STATE OF CA           | ALIFORNIA, DEPARTMENT O   | F PUBLIC HEALTH. C    | OFFICE OF VITAL RE   | CORDS  |  |                           | FORM V          | S 122 (Rev. 1/09) |