

Certificate of Dissolution Declaration of Invalidity of Marriage or Legal Separation

Please Type or Print in Permanent Black Ink

	State File Number
1. Court File Number	
Decree – I certify the marriage of the persons named below was ordered as a	
2. <input type="checkbox"/> Legal Separation <input checked="" type="checkbox"/> Dissolution of Marriage <input type="checkbox"/> Declaration of Invalidity	3. Date of Decree MM / DD / YYYY
4. County of Decree	
5. Signature of Superior Court Clerk	
X	
To be Completed by Petitioner's Attorney or PRO SE	
Spouse A	
6a. Name First Middle Last	6b. Birth Last Name if Different
	6c. Date of Birth (MM/DD/YYYY)
	6d. Birth State (If not USA give Country)
6e. Current Residence (Number and Street)	6f. City
	6g. County
	6h. State
Spouse B	
7a. Name First Middle Last	7b. Birth Last Name if Different
	7c. Date of Birth (MM/DD/YYYY)
	7d. Birth State (If not USA give Country)
7e. Current Residence (Number and Street)	7f. City
	7g. County
	7h. State
8. Place of this Marriage - County	9. State
	(If not USA give Country)
	10. Date of this Marriage
	(MM/DD/YYYY)
	11. Number of Children
	(Born alive of this Marriage)
12. Petitioner	13. Name of Petitioner's Attorney or PRO SE
<input checked="" type="checkbox"/> Spouse A <input type="checkbox"/> Spouse B <input type="checkbox"/> Both <input type="checkbox"/> Other (Specify)	Pro Se
14. Petitioner's Attorney's Address	

15. Spouse A Social Security Number

16. Spouse B Social Security Number