



Certificate of Dissolution Declaration of Invalidity of Marriage or Legal Separation

Please Type or Print in Permanent Black Ink

Court File Number

State File Number

30. Husband's Social Security Number	Decree	I certify the marriage of the persons named below was ordered as a...	2. Date of Decree (Month/Day/4 Digit Year)	3. County of Decree	
	1. <input type="checkbox"/> Legal Separation <input type="checkbox"/> Dissolution of Marriage		/ /		
		<input type="checkbox"/> Declaration of Invalidity			
		4. Signature of Superior Court Clerk			
		X			
		To be Completed by Petitioner's Attorney or PRO SE			
	Husband				
	5. Name	6. Date of Birth	7. Birth State (If not USA give Country)		
	First Middle Last	Month / Day / 4 Digit Year			
	8. Current Residence (Number and Street)	9. City/Town/Location	10. Inside City Limits	11. County	12. State
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
29. Wife's Social Security Number	Wife				
	13. Name	14. Maiden Name	15. Date of Birth	16. Birth State (If not USA give Country)	
	First Middle Last		Month / Day / 4 Digit Year		
	17. Current Residence (Number and Street)	18. City/Town/Location	19. Inside City Limits	20. County	21. State
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	22. Place of this Marriage - County	23. State (If not USA give Country)	24. Date of this Marriage	25. Number of Children Born alive of this Marriage	
		Month / Day / 4 Digit Year			
26. Petitioner	27. Name of Petitioner's Attorney or PRO SE				
<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both <input type="checkbox"/> Other (Specify)					
28. Petitioner's Address					