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## TYPE IN PERMANENT INK

COURT IDENTIFICATION (Court File Number)

## **GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH CERTIFICATE OF DIVORCE, DISSOLUTION OF MARRIAGE OR ANNULMENT**

108-

FILE NUMBER

	HUSBAND-NAME		FIRST	MIDDLE			LAST		
	1.								
HUSBAND	USUAL RESIDENCE — S	TREET ADDRESS	3	CITY, TOWN O	R LOCATION				
HUSE	<b>2</b> a.			2b.					
-	COUNTY			STATE			DATE OF BIRTH (A	Mo, Day, Yr)	
	2c.			3.	3.			4.	
	WIFE—NAME	FIRST	MIDDLE	LAST	MAIDEN N	AME			
	5a.				5b.				
WIFE	USUAL RESIDENCE STREET ADDRESS			CITY, TOWN OR LOCATION					
≥	ба.			6b.					
	COUNTY			STATE	STATE DATE OF BIRTH (Mo, Day, Yr)				
	6c.			7.	7. 8.				
1	DATE OF THIS	CHILDREN UN	DER 18 IN THIS FAMILY (Specify)	PLANTIFF	HUSBAND	WIFE	вотн	OTHER	
	MARRIAGE (Mo. Day, Yr.)	-		CHECK				(Specify)	
	9. ATTORNEY FOR PLANTI	10. FF—NAME	ADDRESS OF ATTORNEY-		D. NO.		TOWN	STATE ZIP	
	(Type or Print)								
	12		13						
				TYPE OF DEC CHECK	REE DIV	ORCE	DISSOLUTION	ANNULMEN	
Ш	THIS DECREE IS GRANTED ON (MONTH DAY YEAR.) ONLY COURT RECORDS CAN INDICATE THE DATE ON WHICH A DECREE BECOMES FINAL.			_15					
DECRE				TITLE OF COURT SUPERIOR COURT OF THE DISTRICT OF COLUMBIA					
	14. SIGNATURE OF CERTIFYING OFFICIAL			16. TITLE OF OFFICIAL					
	17.			CLERK OF THE COURT 18.					

## INFORMATION FOR STATISTICAL PURPOSES ONLY

SBAND	RACE—HUSBAND Specify (e.g., White, Black, American Indian, etc.)	NUMBER OF THIS MARRIAGE Specify (First, second, etc.)	WIFE	RACE—WIFE Specify (e.g., White, Black, American Indian, etc.)	NUMBER OF THIS MARRIAGE Specify (First, second, etc.)	
Ξl	19.	20.		21.	22.	

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