

REPORT OF (Check one)



TYPE IN UPPER CASE
USE BLACK INK

DISSOLUTION OF MARRIAGE
 ANNULMENT OF MARRIAGE
FLORIDA

1. COUNTY			2. DATE OF FINAL JUDGMENT		
3. DOCKET		VOL.	PAGE	4. DATE FILED AND RECORDED	
SPOUSE	5a. NAME OF SPOUSE FIRST		MIDDLE	LAST	5b. MAIDEN NAME (if applicable)
	6a. RESIDENCE -- STATE		6b. COUNTY	6c. CITY, TOWN, OR LOCATION	
	6d. STREET AND NUMBER				
SPOUSE	7a. NAME OF SPOUSE FIRST		MIDDLE	LAST	7b. MAIDEN NAME (if applicable)
	8a. RESIDENCE -- STATE		8b. COUNTY	8c. CITY, TOWN, OR LOCATION	
	8d. STREET AND NUMBER				
9a. PLACE OF THIS MARRIAGE -- COUNTY			9b. STATE (If not in U.S.A., name country)	9c. DATE OF THIS MARRIAGE (Month, Day, Year)	
10a. LIVING CHILDREN -- TOTAL NUMBER			10b. UNDER 18 YEARS OF AGE	11. PETITIONER -- SPOUSE	
12a. ATTORNEY FOR PETITIONER -- NAME			12b. ADDRESS (Street or R.F.D. No., City or Town, State, Zip)		
13. CLERK OF CIRCUIT COURT Gregory C. Harrell			BY		

DH 513, 01/2015, Florida Administrative Code Rule 64V-1.0121 Obsoletes Previous Editions

State Of Florida
Department of Health
Office of Vital Statistics