

INFORMATION SHEET (SIMPLIFIED DISSOLUTIONS)

*Please **PRINT** all information – **DO NOT** use nicknames*

HUSBAND'S INFORMATION:

FULL LEGAL NAME: _____
(First) (Middle) (Last)

ADDRESS: _____
(Street or Box #) (City & State) (Zip Code)

(County) (Lived in present county since when?)

DATE OF BIRTH: _____ TELEPHONE#: _____ FAX#: _____

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WIFE'S INFORMATION:

FULL LEGAL NAME: _____
(First) (Middle) (Last)

ADDRESS: _____
(Street or Box #) (City & State) (Zip Code)

(County) (Lived in present county since when?)

DATE OF BIRTH: _____ TELEPHONE#: _____ FAX#: _____

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WITNESS' INFORMATION (if applicable)

FULL LEGAL NAME: _____
(First) (Middle) (Last)

ADDRESS: _____
(Street or Box #) (City & State) (Zip Code)

TELEPHONE NUMBER: _____ FAX NUMBER: _____

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DOES THE WIFE WISH TO HAVE HER FORMER NAME RESTORED? YES NO

IF "YES", PRINT WIFE'S FORMER FULL LEGAL NAME: _____

DATE OF MARRIAGE: _____ CITY: _____ COUNTY: _____ STATE: _____