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Information for Certificate of Divorce

*Please fill in or attach the following information:*

County Of Residence: \_\_\_\_\_

**Husband's Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Age: \_\_\_\_\_ Race: \_\_\_\_\_ Number of times married: \_\_\_\_\_

How long a resident of Kentucky: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Current Residence: \_\_\_\_\_  
Street # Street Apt#

City County State Zip Code

Name Of Employer: \_\_\_\_\_ Job Type: \_\_\_\_\_

Employment Address: \_\_\_\_\_  
Street # Street Apt#

City County State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Is there currently any type of protection order: Yes  No  What County: \_\_\_\_\_

Who is the Petitioner: \_\_\_\_\_





