**DISSOLUTION OF MARRIAGE**

Husband’s Information Wife’s Information:

Legal Name: Legal Name:

Address: Address:

Telephone #: Telephone #:

Date of Birth: Date of Birth:

Social Security #: Social Security #:

Fla. Driver’s License #: Fla. Driver’s License #:

Date of Issue: Date of Issue:

Citizenship: Citizenship:

**Information Common to Both Parties:**

Date of Marriage:

Place of Marriage: (include county)

Date of Separation:

**Children in Common: (Including Adopted Children)**

Child’s legal name: Child’s legal name:

Date of Birth: Date of Birth:

Place of Birth: Place of Birth:

Sex: Sex:

Social Security #: Social Security #:

**Children of Husband:**

Child’s legal name: Child’s legal name:

Date of Birth: Date of Birth:

Place of Birth: Place of Birth:

Sex: Sex:

Social Security #: Social Security #:

**Children of Wife:**

Child’s legal name: Child’s legal name:

Date of Birth: Date of Birth:

Place of Birth: Place of Birth:

Sex: Sex:

Social Security #: Social Security #:

**Vehicles:**

Make: Make:

Model: Model:

Year: Year:

VIN #: VIN #:

Tag #: Tag #:

Owner: Owner:

**(Please provide copy of vehicle registration)**

**Real Property: YES NO**

**Assets for Husband: Assets for Wife:**

**Bills for Husband: Bills for Wife:**

**Does Wife wish to have maiden name restored? YES NO**

Wife’s Maiden Name: