

STATE OF WYOMING
Vital Statistics Services
ABSOLUTE DIVORCE OR ANNULMENT

Clerk of Court Record Number: _____

State File Number: _____

Applicant	1a. Petitioner/Plaintiff Name (First, Middle, Last, Suffix)		1b. Maiden/Surname (If Applicable)		1c. Sex (M/F)	
	2a. Residence (City, Town or Location)	2b. Zip Code	2c. County	2d. State		
	3. Birthplace (State or Foreign Country)		4. Date of Birth (Month, Day, Year)			
Spouse	5a. Respondent/Defendant Name (First, Middle, Last, Suffix)		5b. Maiden/Surname (If Applicable)		5c. Sex (M/F)	
	6a. Residence (City, Town or Location)	6b. Zip Code	6c. County	6d. State		
	7. Birthplace (State or Foreign Country)		8. Date of Birth (Month, Day, Year)			
Marriage	9a. Place of this Marriage (City, Town or Location)	9b. County	9c. State or Foreign Country	10. Date of marriage (Month, Day, Year)		
	11. Date Couple Last Resided in the same household (Month, Day, Year)	12. Number of Children under 18 in this household as a result of this marriage (Only Children of this Marriage) Number _____ None <input type="checkbox"/> Other (Specify) _____			13. VSS Use Do Not Fill	
	14a. Name of Petitioner/Plaintiff's Attorney Pro Se <input type="checkbox"/>		14b. Address (Street and Number or Rural Route Number, City or Town, State, Zip Code)			
Court Use Only ----- DO NOT FILL BELOW THIS LINE ----- Court Use Only						
Decree	15. I certify that the marriage of the above named persons was dissolved on (Month, Day, Year)		16. Type of Decree (Divorce or Annulment)	17. Date Recorded (Month, Day, Year)		
	18. Number of children under 18 whose physical custody was awarded to: Petitioner <input type="checkbox"/> _____ Joint <input type="checkbox"/> Respondent <input type="checkbox"/> _____ No Children <input type="checkbox"/> Other _____		19. County of Decree	20. Title of Court		
	21. Signature of Certifying Official		22. Title of Certifying Officer	23. Date Signed (Month, Day, Year)		