

Application for Certified Copy of Dissolution of Marriage (Divorce) Certificate

This office has been registering dissolutions of marriage (divorces) occurring in Nebraska since 1909. (For records occurring prior to 1909, or if you wish to obtain the divorce decree, contact the District Court in the county where the divorce was granted.)

PLEASE TYPE OR PRINT LEGIBLY

Full name of spouse a _____

Full name of spouse b _____

City or county where granted _____

Month, day and year granted _____

For what purpose is this record to be used? _____

If this is not your divorce certificate, how are you related to the persons listed on the record? _____ (If this is not yourself, then proof of relationship will need to be provided)

WARNING: Section 71-649, Nebraska Revised Statutes: It is a felony to obtain, possess, use, sell, furnish, or attempt to obtain any vital record for purposes of deception.

SIGNATURE _____

Type or Print Name _____

Mailing Address _____

City, State, Zip _____

Telephone Number _____

Email Address _____

Today's Date _____

(Please enclose a photocopy of your photo ID [i.e. current driver's license] when mailing in this request).

(Please make checks payable to Vital Records)

Only exact amount will be accepted.

Number of certified copies _____ x \$16.00 each = \$ _____ Total

Mail to:

Vital Records
PO Box 95065
Lincoln, NE 68509-5065

(Please enclose a stamped, self-addressed business size envelope)

FOR OFFICE USE ONLY

Check MO Cash

Amount Received _____

Date Received _____

By Whom Received _____

PROOF OF IDENTIFICATION;

DL STATE ID OTHER