



DIVORCE VERIFICATION REQUEST ■ FORM 3917

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

- Was the divorce **filed/granted in the State of Georgia?**
 - If **Yes**, please proceed in completing this form
 - If **No**, please contact *the state in which the divorce occurred* for the requested documents
- Are you requesting a divorce verification that occurred **between July 14, 1952 - December 20, 1996?**
 - If **Yes**, please proceed in completing this form
 - If **No**, you will need to contact the **CLERK OF SUPERIOR COURTS** in the *county* the divorce was granted
- In accordance with the *GA Code Ann., 31-10-27*, there is a **\$10.00 search fee for all requests**
 - The \$10.00 search fee is **NON-REFUNDABLE**; if the file is found, a verification letter will be provided
 - There is an **additional copy fee of \$5.00** for each copy requested at the time of purchase

EXAMPLE:

(1) Certified Copy:	\$10.00 (includes search fee)
+ (1) Additional Copy:	\$5.00
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TOTAL:	\$15.00

- **INCOMPLETE** forms will be **RETURNED** to the requester
- If this request is being mailed, please send (1) **this completed form**, (2) a **VALID copy of picture ID**, and (3) a **U.S. money order** or **certified check** for the exact amount made payable to: **GA State Office of Vital Records**.
- **ONLY ONE CHECK / MONEY ORDER PER APPLICATION**

DO NOT SEND CASH IN THE MAIL

(YOUR REQUEST WILL NOT BE PROCESSED)

Acceptable Forms of ID

- State of Georgia Driver's license unexpired or expired-not more than one year
- State of Georgia Identification Card/ DMV ID Card unexpired or expired-not more than one year
- State of Georgia Weapons Carry License
- Unexpired driver's license issued by another U.S. State, jurisdiction or territory
- Unexpired official Identification Card issued by another U.S. State, jurisdiction or territory
- Unexpired U.S. Passport
- Unexpired Foreign Passport
- U.S. Military Identification, Military Dependent Identification, Veteran's Identification
- Unexpired Consulate Card
- Debit Card with picture
- Employer Identification Card with picture
- School, University, or College Identification Card with picture
- Department of Corrections Identification Card with picture

PLEASE ADDRESS ALL CORRESPONDENCE TO THE ADDRESS BELOW.

STATE OFFICE OF VITAL RECORDS | 1680 PHOENIX BLVD. SUITE 100, ATLANTA, GA 30349 | PHONE 404.679.4702



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*****PLEASE COMPLETE ENTIRE FORM*****

Total number of VERIFICATION LETTERS requested: (\$10 fee includes ONLY 1 certified copy)	ADDITIONAL copies requested: (\$5 for each)	Total Due (refer to example on page 1)

PRINT OR TYPE ALL INFORMATION LEGIBLY

Section 1: DIVORCEE/REQUESTER'S INFORMATION

LEGAL FIRST NAME OF PARTY 1	MIDDLE NAME	LAST NAME	LAST NAME AT TIME OF MARRIAGE
LEGAL FIRST NAME OF PARTY 2	MIDDLE NAME	LAST NAME	LAST NAME AT TIME OF MARRIAGE
DATE OF DIVORCE		PLACE OF DIVORCE (CITY, COUNTY, STATE)	
FIRST NAME OF REQUESTER	LAST NAME OF REQUESTER	RELATIONSHIP (IF OTHER THAN A PARTY)	
EMAIL ADDRESS OF REQUESTER		PHONE NUMBER OF REQUESTER	
SIGNATURE OF REQUESTER			

Section 2: SHIPPING ADDRESS

Write the name and address of the person to whom the certificate is to be mailed and indicate their relationship to the person(s) whose name is on the certificate:

NAME	RELATIONSHIP	
MAILING ADDRESS		
CITY	STATE	ZIP CODE

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