

Division _____

Docket No. _____

**The Commonwealth of Massachusetts
Department of Public Health
Registry of Vital Records and Statistics**

**CERTIFICATE OF ABSOLUTE
DIVORCE OR ANNULMENT**

(G.L. Chap. 208, Sec. 46)
R-408

HUSBAND	Husband-Name First		Middle	Last	
	1.				
	Usual Residence-Street Address		City, Town, or Location		
	2a.		2b.		
	County	State	Date of Birth (mo., day, yr.)	Number of this Marriage (1st, 2nd, specify)	
	2c.	2d.	3.	4.	
WIFE	Wife-Name First		Middle	Last	Maiden Name
	5a.				5b.
	Usual Residence-Street Address		City, Town, or Location		
	6a.		6b.		
	County	State	Date of Birth (mo., day, yr.)	Number of this Marriage (1st, 2nd, specify)	
	6c.	6d.	7.	8.	

Date of this Marriage (mo., day, yr.)	Number of Children Born Alive of this Marriage	Number of Children under Age 18 in this Family
9.	10a.	10b.

FOR COURT USE ONLY					
JUDGMENT	County of Judgment			Title of Court	
	11.			11a.	
	Date of Judgment Nisi (mo., day, yr.)		Type of Judgment - Divorce or Annulment	Date of Judgment Absolute (mo., day, yr.)	
	12.		13.	14.	
Docket Number	Name of Plaintiff		Cause for which Granted		
15.	16.		17.		
Signature of Certifying Official			Title of Official		
18a.			18b.		