Divorce Decree Order Form

Your Name at the time of the Divorce Filing (PRINT CLEARLY)

Last:		_ First:	Middle:
Your phone number (needed if there is a question during processing)			
		Su desire	
Spouse's name at the time of the Divorce filing (PRINT CLEARLY)			
Last:		_ First:	Middle:
Year of Divorce filing:			
If you are unsure of year, please include an estimated time frame			
Type of Divorce Record Request			
	Plain - \$1		
	Certified \$6		
	Exemplified \$16		
Enclosed is a	money order made payable	e to: " Office of Judici a	al Support" in the amount of: \$
You MUST provide a self- addressed stamped envelope for the return mailing.			

MAIL COMPLETED FORM TO:

Office of Judicial Support

ATTENTION FILE ROOM

201 W Front Street

Media, PA 19063

Phone- 610-891-4329