

**SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL**

OFFICE OF VITAL RECORDS AND PUBLIC HEALTH STATISTICS

Columbia, South Carolina

**REPORT OF DIVORCE OR ANNULMENT OF MARRIAGE**

State File No. \_\_\_\_\_

SCDHEC-682-Rev. 4-1979 15M

|         |   |  |                                |   |  |                  |
|---------|---|--|--------------------------------|---|--|------------------|
| ADDRESS | 1 HUSBAND—NAME (first) (middle) (last)  |  |                                | 2 DATE OF BIRTH   | 3 STATE OF BIRTH                             |                  |
|         | 4 RESIDENCE (state) (county) (city)   |  |                                | 5 NUMBER OF THIS MARRIAGE                                 | 6 RACE OR COLOR (specify)                    |                  |
|         | 7 WIFE—MAIDEN NAME (first) (middle) (last)  |  |                                | 8 DATE OF BIRTH   | 9 STATE OF BIRTH                             |                  |
|         | 10 RESIDENCE (state) (county) (city)  |  |                                | 11 NUMBER OF THIS MARRIAGE                                | 12 RACE OR COLOR (specify)                   |                  |
|         | 13 PLACE OF THIS MARRIAGE (state) (county)  |  |                                | 14 DATE OF MARRIAGE (month) (day) (year)                  | 15 NUMBER OF CHILDREN UNDER 18               |                  |
|         | 16 P L A I N T I F F (specify)  |  | 17 DECREE GRANTED TO (specify) |   | 18 WAS DIVORCE CONTESTED (specify yes or no) | 19 LEGAL GROUNDS |
|         | 20 DATE DECREE SIGNED (month) (day) (year)  |  |                                | 21 TYPE OF DECREE absolute divorce or annulment (specify) |  |                  |
|         | 22a MAIDEN NAME RESUMED BY DECREE<br>Yes <input type="checkbox"/> No <input type="checkbox"/>   |  |                                | 22b SUPPLEMENTAL ORDER (if any) (month-day-year)          |  |                  |
|         | 23 COUNTY   |  |                                | 24 DOCKET NUMBER  |  |                  |
|         | 25 I CERTIFY THAT THE ABOVE IS CORRECT ACCORDING TO THE RECORDS OF THIS COURT FILED ON:<br>signature of clerk of court month day year |  |                                |   |  |                  |

**AUTHORITY FOR THIS REPORT IS FOUND IN SECTION 20-3-230 CODE OF LAWS OF SOUTH CAROLINA**

**INSTRUCTIONS:** To the Clerk of Court: When a petition for divorce or annulment is filed, please hand a copy of this form to the attorney for completion of items No. 1 through No. 19. When the is signed, check completeness of these items, execute the bottom section and mail to South Carolina Department of Health and Environmental Control, Office of Vital Records and Public Health Statistics, Columbia, South Carolina, on or before the 10th of the month next succeeding the divorce or annulment.

To the Attorney: Please complete items No. 1 through No. 19 of the Report of Divorce or Annulment of Marriage and ask your client to verify the information. **WHEN THE DECREE IS SIGNED RETURN THE FORM TO THE CLERK OF COURT FOR CERTIFICATION.**