



DIVORCE

TO ARRANGE FOR A CEREMONY OF DIVORCE, PLEASE FOLLOW THESE GUIDELINES.

- MAKE AN APPOINTMENT BY CONTACTING THE RESIDENT AALIM (SHIRAZIHAYDER@HOTMAIL.COM)
- PLEASE FILL OUT THE FORM BELOW AND MAIL IT TO SURREY, BC V3W 2V3, CANADA

WIFE INFORMATION

NAME: _____ MIDDLE: _____ LAST: _____ FATHER'S NAME: _____

DATE OF BIRTH: _____ SSN: _____ HOME ADDRESS: _____

PHONE: _____ FATHER'S PHONE: _____ E-MAIL: _____

ATTESTATION

SIGNATURE: _____

TODAY'S DATE: _____

DETAILS

VIRGIN: YES NO

MAHR PAID: NO

WIKALAT: YES NO

HUSBAND INFORMATION

FIRST NAME: _____ MIDDLE: _____ LAST: _____ FATHER'S NAME: _____

DATE OF BIRTH: _____ SSN: _____ HOME ADDRESS: _____

PHONE: _____ FATHER'S PHONE: _____ E-MAIL: _____

ATTESTATION

SIGNATURE: _____

TODAY'S DATE: _____

DETAILS

IS THE WIFE DEMANDING THE DIVORCE: YES NO

DOES THE HUSBAND WANT THE DIVORCE: YES NO

DRIVER LICENSE NUMBER: _____

I, HEREBY DECLARE, UNDER OATH AND UNDER THE PENALTY OF PERJURY, THAT ALL THE ABOVE-MENTIONED INFORMATION IS TRUE AND CORRECT. I UNDERSTAND THAT FURNISHING FALSE INFORMATION OR HIDING ANY NECESSARY INFORMATION MAY RESULT IN UNEXPECTED LEGAL CONSEQUENCES.

I, _____ HEREBY MAKE MR. _____ MY SHAR-IE WAKEEL (AGENT) TO DIVORCE MY WIFE _____ ON MY BEHALF.

(HUSBAND'S NAME) (ALIM'S NAME) (WIFE'S NAME)

HUSBAND'S SIGNATURE: _____

WITNESS 1

FULL NAME: _____

ADDRESS: _____

TEL: _____

WITNESS 2

FULL NAME: _____

ADDRESS: _____

TEL: _____

RESIDENT ALIM

RESIDENT ALIM SIGNATURE: _____

DATE: _____

IMPORTANT: THIS DIVORCE FORM IS CONSIDERED TO BE VOID AND LEGALLY INVALID IF IT DOES NOT BEAR THE SPECIAL SEAL OF ABRAAR.ORG ALONG WITH THE REGISTERED FILE NUMBER.