REQUEST TO TERMINATE REGISTRATION OF DOMESTIC PARTNERSHIP					ARTNERSHIP	
BY EMAIL Office of the City Clerk, City of Seattle, W						
THIS SECTION TO BE COMPLETED BY ONE OF THE ORIGINAL REGISTRANTS:						
I, (Requester)	I, request that the registration of the domestic part					
(Requester)	oriz	ainally re	gistered on			
<i>i</i>	UIĮ	ginaliy ie	gistered on	(Date)		
(Partner) be terminated. I can	be contacted at:			(2000)		
			Please	e send the letter	confirming termination by	
				Email	Postal mail	
Signature)		Date				
			Please	also send a co	py to (optional):	
<b>.</b>						
Mailing address						
City	State	ZIP				
SUBSCRIBED AND SV	COMPLETED BY A NO VORN TO BEFORE ME		<sup>IBLIC</sup> Notary	- please use thi	s space for notarial seal.	
tills day of	,	·				
Signature						
-	PIRES:					
ADDITIONAL INFORM	ATION					
	If you are not sure of the date your partnership was originally registered, leave that line blank or contact the Office of the City Clerk at 206-684-8344 or <u>LEG_domesticpartnership@seattle.gov</u> to get that information.					
This form and any documents associated with the domestic partnership registration or termination are not they are public records subject to disclosure under Revised Code of Washington (RCW) Section 42.56. If questions or concerns on this issue, please contact our public disclosure unit at <u>LEGPDR@seattle.gov</u> or 206-684-7566.				ction 42.56. If you have		
FOR CITY CLERK	S OFFICE USE ONLY	/			•	

Database Updated:	Confirmation Mailed:

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EMAIL YOUR COMPLETED, ELECTRONICALLY SIGNED AND ELECTRONICALLY NOTARIZED FORM TO :

LEG\_domesticpartnership@seattle.gov