				Registration ID#:
	Y MAIL OR	IN PERSON	City of Seattle, Washingto	n
THIS SECTION TO BE COM				
I / we request that the D	Domestic Partn	ership Regist	ration of:	
(Name 1)		and (Name 2)		This space for City Clerk's Office use only
originally registered with the City of Seattle on			, be terminated. (Date)	
Requested by:				
(Printed name)			(Signature)	Date
E-mail / phone				
Mail confirmation to:			And also to (optional)	
Street Address / P.O. Box		Unit #		
City	State	ZIP		
THIS SECTION TO BE CON SUBSCRIBED AND SWOR			C	
this day of				
Signature				
MY COMMISSION EXPIRE	S:			
ADDITIONAL INFORMATIC	N			

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> for the information.

This form and any documents associated with the domestic partnership registration or termination are not confidential; they are public records subject to disclosure under Revised Code of Washington (RCW) Section 42.56. If you have questions or concerns on this issue, please contact our public disclosure unit at <u>LEG domesticpartnership@seattle.gov</u> or 206-684-7566.

FOR CITY CLERK'S OFFICE USE ON	LΥ
--------------------------------	----

Database Updated:	Confirmation Mailed:

MAIL OR BRING SIGNED, NOTARIZED FORM TO:

Office of the City Clerk DPR Program 600 Fourth Avenue P. O. Box 94728 Seattle, WA 98124-4728

Call, email, or see our website, www.seattle.gov/cityclerk/about/contact-theoffice-of-city-clerk for our in-person hours.