

Domestic Partnership Termination

I, _____, affirm, under penalty of perjury, that the Affidavit of Domestic Partnership attested to and signed by me on _____ shall be and is terminated as of this date.

Termination of the Affidavit of Domestic Partnership is due to:

- Termination of Domestic Partnership
- Death of Domestic Partner

I affirm that a copy of this termination statement has been mailed to my former domestic partner.

Domestic Partner

Witness

(Print Name)

(Print Name)

Signature

Signature

Date

Date

State of Missouri)
County of _____)ss

Suscribed and sworn to before me a notary public on

this _____ day of _____, 20 _____

My commission expires:

Notary Public

For use by the
City Clerk's Office - Registration # _____