CITY OF ANN ARBOR
TERMINATION OF DOMESTIC PARTNERSHIP

I/We, the undersigned, do declare that:

_________________________________________  And  _______________________________________
Print Name                                      Print Name

Formerly domestic partners, pursuant to Chapter 110, Section 9:89 of Title IX of the
Code of the City of Ann Arbor, hereby dissolve said partnership.

Name

Name

Address

Address

Signature

Signature

Subscribed and sworn to before me this
_____ Day of ________________ 20__

Subscribed and sworn to before me this
_____ Day of ________________ 20__

_____________________________________
Notary Public

_____________________________________
Notary Public

My Commission Expires:  My Commission Expires:

This termination will take effect upon filing with the City Clerk.

Information collected on this document is public and may be viewed by all requestors.