

**Statement of Termination of Domestic Partnership**

I, and \_\_\_\_\_ have terminated our domestic partner relationship effective \_\_\_/\_\_\_/\_\_\_.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Domestic Partner

\_\_\_\_\_  
Date

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\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date