



COUNTY OF LOS ANGELES
REGISTRAR-RECORDER/COUNTY CLERK
12400 E. IMPERIAL HWY. -P.O. BOX 53592 LOS ANGELES, CALIFORNIA 90053-0595
www.lavote.net

DEAN C. LOGAN
Registrar-Recorder/County Clerk

File Number _____

File Date _____

COUNTY OF LOS ANGELES
STATEMENT OF TERMINATION OF DOMESTIC PARTNERSHIP*
(LOS ANGELES COUNTY CODE, CHAPTER 2.210)

I/We, the undersigned, having filed a statement of domestic partnership on _____,
hereby state that such domestic partnership has been terminated.

Signature

Signature

Print Name

Print Name

Address

Address

City, State, Zip Code

City, State, Zip Code

Date of Birth

Date of Birth

***Only one signature is required.**
This document is a public record.

File Number _____

File Date _____