

City of Cambridge

DOMESTIC PARTNERSHIP

TERMINATION

WORKSHEET

Please submit this worksheet with Termination form
Mail or hand-deliver to the *Cambridge City Clerk*

Completing the following will prevent delays with the processing of your request

- All fields on the Domestic Partnership TERMINATION form were clearly printed in BLACK ink only
- A copy of the TERMINATION form was sent by CERTIFIED MAIL to my former Domestic Partner

I have enclosed in an envelope this WORKSHEET along with all the items listed below and mailing them to the following address:

Cambridge City Clerk
795 Mass Ave #103
Cambridge, MA 02139

- The completed **original** TERMINATION form
- The **original** GREEN certified mail slip
- (\$5.⁰⁰) *CHECK* or *Money Order* payable to the *City of Cambridge*
- My telephone # is _____

City of Cambridge

DOMESTIC PARTNERSHIP

TERMINATION

I hereby notify the City Clerk of the City of Cambridge, Massachusetts pursuant to Ch. 2.119 of the Municipal Code that:

My name is _____

My Domestic Partnership with _____ **has been terminated.**

We originally filed our Domestic Partnership with the City of Cambridge in the year of ()

I sent a copy of this notice **CERTIFIED MAIL** to my former Domestic Partner on _____

I mailed the copy to:

NAME _____

ADDRESS _____

I declare under the penalties of perjury under the laws of the Commonwealth of Massachusetts that the statements above are true and correct.

Signed on _____, **in the City of** _____
DATE

Signature _____

Print Name _____