**Superior Court of Washington**

**County of King**

|  |  |  |
| --- | --- | --- |
|  | Petitioner, |  |
|  |  | No. |
| vs |  | Certificate of Dissolution of Domestic |
|  |  | Partnership |
|  | Respondent, |  |



**Certificate of Dissolution of Domestic Partnership**

**Please Type or Print in Permanent Black Ink**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Court File Number** | | | | | | | | | | | | | | | | |  | | |  | | |
|  |  | | | | | | | | | | | | | | | | | **State File Number** | | | | | |
|  | I Certify the partnership of the persons named below was ordered as a | | | | | | | | | | | | | | | | | | | | | | |
|  | 1.  Dissolution of Partnership  1.  1 | | | | | | | | 2. Date of Decree (Month/Day/4 Digit Year) | | | | | | | | | | | 3. County of Decree | | | |
|  | | | |  | | |  | | | | KING | | | |
| 4. Signature of Superior Court Clerk | | | | | | | | | | | | | | | | | | | | | | |
| X | | | | | | | | | | | | | | | | | | | | | | |
| **To be Completed by Petitioner’s Attorney or PRO SE** | | | | | | | | | | | | | | | | | | | | | | |
| **Partner 1 Please Type or Print** | | | | | | | | | | | | | | | | | | | | | | |
| 5a.Name | | | | | 5b. Birth Name | | | | 6. Date of Birth | | | | | | | | | | 7. Birth State (if not USA give Country) | | | |
|  | | | | |  | | | |  | | | |  | |  | | | |  | | | |
| First Middle Last | | | | |  | | | | Month Day 4 Digit Year | | | | | | | | | |  | | | |
| 8. Current Residence (Number and Street) | | | | 9. City/Town/Location | | | | | | | 10. Inside City Limits | | | | | 11. County | | | | | 12. State | |
|  | | | |  | | | | | | | Yes  No | | | | |  | | | | |  | |
|  | **Partner 2** | | | | | | | | | | | | | | | | | | | | | | |
| 13a. Name | | | | | | 13b. Birth Name | | | | 14. Date of Birth | | | | | | | | | 15. Birth State (if not USA give Country) | | | |
|  | | | | | |  | | | |  | | | |  |  | | | |  | | | |
| First Middle Last | | | | | |  | | | | Month Day 4 Digit Year | | | | | | | | |  | | |  |
| 16. Current Residence (Number and Street) | | | | 17. City/Town/Location | | | | | | | 18. Inside City Limits | | | | | 19. County | | | | | 20. State | |
|  | | | |  | | | | | | | Yes  No | | | | |  | | | | |  | |
| 21. Date of this Partnership | | | 22. Certificate Number | | | | 23. Petitioner | | | | | | | | | | | 24. Name of Petitioner’s Attorney or PRO SE | | | | |
|  |  |  |  | | | | Partner 1  Partner 2  Both  Other | | | | | | | | | | |  | | | | |
| Month Day 4 Digit Year | | |  | | | | (specify) | | | | | | | | | | |
| 25. Petitioner’s Address | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |