

**WISCONSIN TERMINATION OF DOMESTIC PARTNERSHIP CERTIFICATE APPLICATION**  
**(for Mail or In-Person Requests)**

**TYPE or PRINT.**

**PENALTIES:** : Any person who illegally possesses any vital record with knowledge that the vital record has been illegally obtained is guilty of a Class I felony [a fine of not more than \$10,000 or imprisonment of not more than 3 years and 6 months, or both, per Wis. Stat. § 69.24(1)].

<b>I. APPLICANT INFORMATION</b>	CURRENT NAME - First Last			MAIL TO NAME - First (if different) Last		
	YOUR STREET ADDRESS ( <i>CANNOT be a P.O. Box address</i> ) Apt. No.			MAIL TO ADDRESS (if different) Apt. No.		
	City	State	ZIP Code	City	State	ZIP Code
	DAYTIME TELEPHONE NUMBER ( )			EMAIL ADDRESS		
	TYPE OF CURRENT VALID PHOTO ID (See item 3 on page 2.)	PHOTO ID NUMBER		STATE OF ISSUANCE	EXPIRATION DATE	
<b>II. APPLICANT'S RELATIONSHIP TO PERSON(S) NAMED ON THE CERTIFICATE</b>	Per Wis. Stat. § 69.20(1), a <b>CERTIFIED</b> copy of a termination of domestic partnership certificate is only available to those with a "direct and tangible interest." (A-E)					
	CHECK ONE box which indicates YOUR RELATIONSHIP to one of the PERSONS NAMED on the termination of domestic partnership certificate.					
	<p>A. <input type="checkbox"/> I am <b>one of the persons named</b> on the termination of domestic partnership certificate.</p> <p>B. I am a <b>member of the immediate family</b> of one of the persons named on the termination of domestic partnership certificate.  <input type="checkbox"/> Parent                      <input type="checkbox"/> Child                      <input type="checkbox"/> Brother / Sister  <input type="checkbox"/> Maternal Grandparent    <input type="checkbox"/> Paternal Grandparent</p> <p>C. <input type="checkbox"/> I am the <b>legal custodian or guardian</b> of one of the persons named on the termination of domestic partnership certificate.</p> <p>D. <input type="checkbox"/> I am a <b>representative authorized</b> by any person in categories A - C, including an attorney. Specify the person you represent: _____</p> <p>E. <input type="checkbox"/> I can demonstrate the divorce certificate is necessary for the <b>determination or protection of a personal or property right</b>. Specify your interest _____</p> <p>F. <input type="checkbox"/> None of the above. I am requesting an <b>uncertified</b> copy. (Copy will not be valid for identity or legal purposes.)</p>					
NOTE: Grandchildren, stepparents, stepchildren, stepbrothers / stepsisters may only obtain certified copies as categories C – E.						
<b>PURPOSE FOR WHICH DOCUMENT IS REQUESTED:</b>						
<b>III. FEES</b>	First Copy Fee ..... \$ 20.00 <u>20.00</u>					
	Additional copies of the same record issued at the same time as the first copy ... X \$ 3.00 _____ Number of Additional Copies					
<b>TOTAL</b> _____						
<b>Submit your application materials and fee to:</b>						
<b>Be sure to include:</b> <input type="checkbox"/> completed form, <input type="checkbox"/> acceptable identification, <input type="checkbox"/> payment, <input type="checkbox"/> any additional proof or authorization required						
<b>IV. TERMINATION OF DOMESTIC PARTNERSHIP INFORMATION</b>	PARTNER "A" BIRTH NAME – First		Middle	Last		
	PARTNER "B" BIRTH NAME – First		Middle	Last		
	COUNTY (where the termination of domestic partnership was filed)			DATE OF THE OFFICIAL TERMINATION (MM/DD/YYYY)		
I hereby attest that the information provided on this application is correct to the best of my knowledge and belief and that I am entitled to copies of the requested termination of domestic partnership in accordance with the categories listed above.						
SIGNATURE (Applicant)				Date Signed (MM/DD/YYYY)		

**Important: Signature and payment are required for processing.**

1. **What is the difference between a “certified” and an “uncertified” copy of a termination of domestic partnership certificate?**

**A CERTIFIED COPY:**

- Is printed on security paper, has a raised seal, and shows the signature of the State Registrar or Local Registrar.
- Can be used for legal purposes.
- Can only be obtained with a direct and tangible interest as defined in Wis. Stat. § 69.20(1).

**AN UNCERTIFIED COPY:**

- Is printed on plain paper and marked “uncertified.”
- Is for information purposes only and cannot be used for identity or legal purposes.
- Contains the same information as a certified copy.

2. **How long will it take to process my request?**

**APPLYING IN PERSON**

**APPLYING BY MAIL**

3. **What identification is required when applying for a termination of domestic partnership certificate?**

Requests for certified copies require proof of identification. Applicant’s original ID is required for in-person applications. A **photocopy** of the applicant’s ID is required for mail applications.

**At least one form of ID must show your name and address. Expired cards or documents will not be accepted.**

Examples of acceptable forms of identification include:

**One of these:**

- State issued driver’s license or ID card
- US Government issued photo ID
- US or Foreign passport
- Tribal or Military ID card

**OR**

**Two of these:**

- Bank/Earnings statement
- Current, dated, signed lease
- Health insurance card
- Utility bill or traffic ticket
- Vehicle registration/title

**If you have questions regarding this form, please call  
or visit our website at**