

New Jersey Judiciary, Family Division of Superior Court
NOTICE OF TERMINATION OF DOMESTIC PARTNERSHIP
To be completed and faxed by court staff

**FAX TO State Registrar of Vital Statistics at (609) 341-2007
on Entry of Court Order**

Docket number: FM - _____

Names of Domestic Partners:

Date the Affidavit of Domestic Partnership was filed: _____

State where registered: _____

Date of Court Order Terminating Domestic Partnership: _____

Submitted by:

Name

Title

Date

Family Division, _____ County