

Local file number

State file number

Declaration of Oregon Registered Domestic Partnership

This declaration of domestic partnership must be registered with an Oregon county clerk to be valid.

| | | | |
|-----------|--|--|--|
| Partner A | 1. Partner A – Legal name: First Middle Last | | |
| | 2. Surname at birth (<i>if different than current legal name</i>): | | 3. Other legal surnames used: |
| | 4. Birthplace (<i>state or foreign country</i>): | 5. Date of birth (<i>month, day, year</i>): | 6. Age (<i>18 or older</i>): |
| | 7. Sex: | 8. Current status (<i>never married, widowed, divorced</i>): | 9a. Resident county: |
| | 9c. Mailing address: Number and street City or town | | 9b. Resident state: State Country ZIP code |
| | 10. Partner A legal name taken after domestic partnership: First Middle Last | | |

| | | | |
|-----------|--|---|---|
| Partner B | 11. Partner B – Legal name: First Middle Last | | |
| | 12. Surname at birth (<i>if different than current legal name</i>): | | 13. Other legal surnames used: |
| | 14. Birthplace (<i>state or foreign country</i>): | 15. Date of birth (<i>month, day, year</i>): | 16. Age (<i>18 or older</i>): |
| | 17. Sex: | 18. Current status (<i>never married, widowed, divorced</i>): | 19a. Resident county: |
| | 19c. Mailing address: Number and street City or town | | 19b. Resident state: State Country ZIP code |
| | 20. Partner B legal name taken after domestic partnership: First Middle Last | | |

I acknowledge that: I am entering into a domestic partnership with the party listed above (*Partner B*); I am at least 18 years of age; I and/or my partner reside in Oregon and am otherwise capable to enter into this relationship. I declare the information and representations contained herein are true, correct and contain no material omissions of fact to the best of my knowledge and belief. I consent to the jurisdiction of the circuit courts of Oregon for the purpose of an action to obtain a judgment of dissolution or annulment of the domestic partnership or for legal separation of the partners in the domestic partnership, or for any other proceeding related to the partners' rights and obligations, even if one or both partners cease to reside in or to maintain a domicile in this state.

Signature partner A (*current name*) _____ Date _____ State of _____,
 county of _____. This instrument was acknowledged before me on _____ (date),
 by _____ (*name(s) of person(s)*).

Signature of notarial officer: _____ Seal: _____
 My commission expires: _____

I acknowledge that: I am entering into a domestic partnership with the party listed above (*Partner A*); I am at least 18 years of age; I and/or my partner reside in Oregon; and am otherwise capable to enter into this relationship. I declare the information and representations contained herein are true, correct and contain no material omissions of fact to the best of my knowledge and belief. I consent to the jurisdiction of the circuit courts of Oregon for the purpose of an action to obtain a judgment of dissolution or annulment of the domestic partnership or for legal separation of the partners in the domestic partnership, or for any other proceeding related to the partners' rights and obligations, even if one or both partners cease to reside in or to maintain a domicile in this state.

Signature Partner B (*current name*) _____ Date _____ State of _____,
 county of _____. This instrument was acknowledged before me on _____ (date),
 by _____ (*name(s) of person(s)*).

Signature of notarial officer: _____ Seal: _____
 My commission expires: _____

| | | |
|----------------|----------------------------------|---|
| Local Official | County of filing: _____ | Signature of county official at county of filing: _____ |
| | Date registered at county: _____ | Name of issuing official (<i>print</i>): _____ |

The information below is optional and will not appear on certified copies of the RECORD.

| | | | | | | |
|-----------|--|--|---|--------------|---|-----------------|
| Partner A | 20. Number of this partnership (<i>include marriages and domestic partnerships</i>) 1st, 2nd, etc. (<i>specify below</i>): | 21. If previously married or part of a domestic partnership, how did it end? By death, divorce, dissolution or annulment? (<i>specify below</i>) | 22. Hispanic origin (<i>if yes, specify</i>): | 23. Race(s): | 24. Education - highest grade completed (<i>specify below</i>): | 25. Occupation: |
| | 20a. | 21a. | 22a. | 23a. | 24a. | 25a. |
| Partner B | 20b. | 21b. | 22b. | 23b. | 24b. | 25b. |